~~315~~ 116

Harold White ten weeks old was in perfect health at the time of his vaccination. Soon after his arm became very much inflamed from the shoulder to the elbow and he died suddenly a month later. A coroner's inquest found that the child had been overlaid by the parents. The mother supplied the following statement.

> God only knows how our darling suffered. Some of our neighbors have had big families but never saw anything like the arm our baby had and any of them would swear it was vaccination that killed him..... they ought to have let the jury see him.

Emma Winifred Forsyth aged five months was vaccinated by the public vaccinator December 25th, 1903 and died on January 10th, 1904. The certificate of death, whereof I have a copy says "Pneumonia and Peritonitis following Septic inflammation of Vaccinated arm."

Surely the vaccine material furnished the sepsis!

Mrs. M. L. Hill of Barnoldly-le-Beck nr. Grimsby wrote to Mr. Bonner on the 4th August 1905:

> "With regard to my child there never was a finer or stronger one born(those were the doctor's words)-------
> We never had the least trouble with him until he was vaccinated.
> He was vaccinated on the 19th of June. Twelve days after inflammation set in in the arm passing down to the finger end and upward across the chest into the other arm: also going down to the fingers and swelling terribly.
> It then started down the body and into the feet. We had to have him on a pillow the whole time.---
> Another doctor was called in. They found matter had formed in the body and that an operation would be necessary---and he would be all right in a few days----
> He lived only 48 hours after. No pen can describe the terrible sufferings he had to bear; for a whole fortnight he did not sleep more than half an hour at a time, and then only when he was given medicine (viz. an opiate? Make what use you like of this letter. It may be the means of saving some dear child the terrible sufferings mine had."

The death certificate, whereof I have a copy, says as to cause of death, "Vaccination one month; cellulitis 14 days; peritonitis two days.

On the 6th of November 1905 Samuel James Barnes of South Holmwood Dorking a perfectly healthy child of 4 months was vaccinated by the public vaccinator and eight days later violent

inflammation developed and the arm swelled enormously; the patient suffered excrutiating pain, as was apparent by its agonizing screams; he died on the 30th November. The doctor certified that the cause of death was erysepelas, but although the parents and the entire neighborhood demanded an inquest the Coroner refused to hold one.

At a public indignation meeting held in Dorking, the father said "Everything that had been already said in reference to the torture undergone by their child was perfectly true.' Brother Physicians! Our duty is to "heal the sick", and the overruling canon of medical ethics, is to do the patient no harm. I implore you to open your eyes and learn to see the mischief our profession has been doing to the race during the past one hundred years and highly resolve that the murderous practice of the inoculation of the products of disease shall cease!

Parents, you who have inherited the traditions of Wat Tyler, of 1648, of 1688 and of 1776 strike for the lives and health of your children. Refuse obedience to a shameful law; obedience to which shames you as much as its enactment does ~~the~~ a ignorant law-makers and grasping doctors!

his lymph had four cases (out of sixty-eight,) of Erythematous eruptions of a violent character, one of which ended in death. Every physician knows that Erythema is a frequent Secondary of Syphilis.

The New York Medical Times for August second, 1854, reports the case of a child, six years of age, previously in good health and of healthy parentage who was vaccinated. An ulceration appeared at the vaccinated point and was a long time before it healed. An eruption then appeared on the child's body. At the expiration of three years the child had copper-colored blotches on its arms and ulcerations of the throat. The interpretation of this is so clear that I must apologize for mentioning it; but disasters of this character are dismissed without a thought upon the consequences to the unhappy patient. The interpretation is that a ~~Syphilitic~~ resembling Syphilis disease was imparted to that child, and the constitution given to it by its healthy parents was RUINED for life. Oh! But Syphilis can be cured! ~~Yes by proper treatment, which not one physician in twenty would know how to give, and~~ Yes, but even after the most thorough cure that the best skill and knowledge can give, the vitality of the patient is lowered, and his susceptibility to all disease increased to an ~~immeasurable~~ always unknowable extent!

254 — In Estlin's first experiment (second remove from the cow) the areola was delayed until the thirteenth day and at the same time there came out all over the child's body and extremities a rash in patches (maculae), accompanied by much constitutional disturbance. (#40) Again he refers to the frequency of rashes in cases of the sixth remove from the cow. (#41) The resemblance of this roseola to Syphilitic rash was observed by Dr. Parrot who, in "La Syphile héréditaire, etc." 1886, p.33 quoted by Dr. Creighton, in "Cow-pox and Vaccinal-syphilis", p.102, note, says: "Une éruption qui mérite de nous arreter au point de vue de sa ressemblance avec la Syphilide maculeuse, est la Roseola vaccinale".

At page 102 of Dr. Creighton's work he refers to the indifference with which Roseola and even Pemphigus are regarded by vaccinal au-

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#40 London Medical Gazette, Vol. XXII., Ann: 1838, p.979.
#41 Ib. Vol. XXIII., p.115.

thorities and quotes a case of Ceely's, which as he truly remarks illustrates "the extraordinary sports"(#1) that the systematic practice of vaccination sometimes brings out." Ceely vaccinated a remarkably fine, florid, plump, vivacious infant, aged eight months with an active lymph, about eight removes from the cow.

> "At the acme of the areola of the two vesicles, nearly the whole surface of the skin of the face, trunk and limbs was suddenly covered with large, elevated erythematous patches and spots, which became surmounted with vesicles and pemphigoid bullae of various forms and sizes, exciting considerable and intolerable irritation.(#2) But this was not all, for nearly the whole of the mucous membrane of the lips, cheeks, mouth and fauces, was affected in like manner; the whole exhibited a most deplorable sight and certainly not without danger. Five or sixweeks elapsed before the vesicles and bullae ceased to appear and the child was restored to comparative health and comfort." (###)

"Comparative health and comfort," and professional ethics seems to have no word of reproof or criticism to make upon the reckless infliction of agony which this helpless infant could neither resist, describe nor resent! Nor does 'Professional ethics' perceive any need for proffering redress (though for a probably ruined life no redress could be given) nor even sympathy for the suffering thus gratuitously inflicted upon the helpless child by those who should protect it!

The constitutional condition expressed by the above described eruptions is apt to be persistent, and the rash to reappear after repeated intervals: this fact is illustrated by the cases of Daniel Regner; sup.p.156 and of L.C. post p. a large number of physicians

In the practice of ~~the old school of medicine~~, these rashes are suppressed and are then supposed to be cured. But this is an error, and they either break out again, if the patient is of strong vitality, or as too frequently happens, they are thrown back upon some mucous membrane and there set up morbid processes, the cause whereof is rarely appreciated, but which too often lead to years of suffering, open to tuberculosis cutting off the patient from all that "joy of living" which is man's normal right,

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(#1) Although the term 'sports' is not incorrectly used to convey by a familiar mode of speech the idea of something unusual; it is to be borne in mind that the so-called 'sport' is not a 'species' in the sense of an object of Natural History, but an unusual condition.

(##) And this inflicted upon a helpless infant of eight months!

(###) Trans:Prov:Med:&:Surg:Assoc:1842, p.231(note). Compare this, Mr. Hutchinson's case of "gangrenous eruption after vaccination" post p. "Med.Chir.Trans. IXV. 1882, p.1. and Dr.Crocker's cases, Ib.1887, (Atlas, Plate Figs.)

leading finally to a painful and premature death.

256 - In 1871 a select committee of the British House of Commons took much testimony on the subject of vaccination. Among the eminent physicians then examined was Dr. William Job Collins, (whose son was one of the members of the Royal Commission on Vaccination, 1889) and who for twenty

Note #3 As the term "public Vaccinator" is now applied to persons specifically employed by the Local Government board, I have used the term "Official" in preference to "public". At the time of Dr. Collins service the persons holding such positions as he held by him were popularly called "public vaccinators"; but as Dr Collins' use of the term was the subject of Caril by the communities really owing to the new "appropriation" of the term, I have employed the term 'official' instead.

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I.E. Where the lesions described by Spinzig did not exist or had made little progress.

See supra note #p.11.

There had arisen somehow, Sydenham's "Epidemic constitution of the Atmosphere" and which was probably [illegible]

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During that period there occurred six or seven epidemics of small-pox in London. He has refused to vaccinate for ten or twelve years and sacrificed L500 a year by so doing. In 1847, 1848, 1851 and 1852 he was an official vaccinator in one of the largest parishes in London (St. Pancras), and had an opportunity of testing the prophylaxy of cow-poxing by comparing the progress of small-pox among the vaccinated and the unvaccinated. There was going on during that time a clandestine inoculation of small-pox. This was performed both in the vaccinated and unvaccinated, and he found that about two thirds of the inoculated cases had been successfully vaccinated, so that the variolation producing small-pox did not prevent the variolation from where the children were strong and healthy, both among the vaccinated and unvaccinated the patients recovered easily; but those who had been previously debilitated by the influence of vaccination shared a very different fate, for they had confluent small-pox in its most hideous form (Ib.140 & 177) This comparison applies to those who had been inoculated in the manner especially approved by the College of Physicians ##, Ib.142. Among those who took small-pox there was no advantage in having been vaccinated: some who were constitutionally strong and not living in a polluted atmosphere enjoyed comparative immunity; but those who had been vaccinated and even revaccinated and who were living in the varioloid atmosphere, suffered dreadfully from the poisonous influence of small-pox. ### Two cases came under his immediate notice of persons who died in the most hideous form of confluent small-pox, who had been successfully vaccinated and revaccinated. (Ib.144-5). One case, that of a lady, had

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been vaccinated as an infant, revaccinated before the age of puberty by the witness, and again at the age of thirty or forty, shortly before the attack which killed her. #9 All three operations were successful (Ib. 151-5) At the commencement of the present epidemic (1871) Dr. Collins was called to visit six children who had small-pox and had not been vaccinated. The oldest (it was said) had caught the small-pox when visiting at the house of a friend whose child had died of small-pox after vaccination. The six children had it very lightly, all recovered and have no mark or scar. The mother who attended them had been vaccinated and revaccinated, and she had the disease in the confluent form so that her life was dispaired of. Two young men, living in the same

Note #1 to p. 234 of best Co:p.257 of second.

The mental attitude of this well-meaning gentlema,as disclosed by Dr:Collins narrative has been frequently encountered by all who have attempted the task of enlightening their neighbors with regard to the vaccinal superstition.
Instance upon instance of flagrant failure"to protect",-frightful cases of disasters arising from the use of "the protective virus",fail to make the smallest impression upon most of those before whose eyes they happen,unless the failures or disasters occur in their own families;and even then,they frequently allow their common sense to be mocked,and their judgment to be hoodwinked by shallow and baseless assertions made by way of excuse,and that too by persons interested in deceiving them.

if I had not seen it in my own family I would not have believed it". (Ib.156) The statements issued by the London Hospital with regard to the difference between the vaccinated and unvaccinated are erroneous and misleading. Dr. Collins showed at great length how the vaccination marks may be obscured both by time and by the disease itself; also that the class of really unvaccinated who take the disease are persons generally low in the scale of human existence and who have not the power of resisting the disease when attacked. These bear no comparison to servants, who are generally well-fed, well-housed, well-clad and taken especial care of(but he might have added, have been compelled to be vaccinated under penalty of losing their employment) When any of this class get small-pox, they are physically stronger, and much more likely to recover than those who belong to the unvaccinated class (see also Q. 215-8) Dr. Collins questioned the truth of the theory that Hospital

been vaccinated as an infant, revaccinated before the age of puberty by the witness, and again at the age of thirty or forty, shortly before the attack which killed her. #49 All three operations were successful (Ib. 151-5) At the commencement of the present epidemic (1871) Dr. Collins was called to visit six children who had small-pox and had not been vaccinated. The oldest (it was said) had caught the small-pox when visiting at the house of a friend whose child had died of small-pox after vaccination. The six children had it very lightly, all recovered and have no mark or scar. The mother who attended them had been vaccinated and revaccinated, and she had the disease in the confluent form so that her life was dispaired of. Two young men, living in the same house and had been vaccinated, caught the small-pox; one had it in the confluent form and the other had it very badly. A neighbor who felt very indignant that so many children could be found in one locality who had not been vaccinated; yet to mitigate the troubles of the family volunteered to take charge of one of the children saying to Dr. Collins, "You know I have no fear of small-pox, because my children have been vaccinated." His three sons took the disease; Dr. Collins asked him : "Well, what is your opinion now about Vaccination?" He replied "Well, if I had not seen it in my own family I would not have believed it". (Ib.156) The statements issued by the London Hospital with regard to the difference between the vaccinated and unvaccinated are erroneous and misleading. Dr. Collins showed at great length how the vaccination marks may be obscured both by time and by the disease itself; also that the class of really unvaccinated who take the disease are persons generally low in the scale of human existence and who have not the power of resisting the disease when attacked. These bear no comparison to servants, who are generally well-fed, well-housed, well-clad and taken especial care of(but he might have added, have been compelled to be vaccinated under penalty of losing their employment) When any of this class get small-pox, they are physically stronger, and much more likely to recover than those who belong to the unvaccinated class (see also Q. 2158) Dr. Collins questioned the truth of the theory that Hospital

49 # which was probably INVACCINATED.

nurses escaped small-pox because of vaccination. As the subject is now clearly understood, but is still often repeated by the more ill-informed pro-vaccinists, it may be well to explain here what Dr. Collins called "one of the stumbling blocks of the profession."

One reason, frequently assigned by both upholders and opponents of vaccination is, that the nurses are generally 'protected' by a previous attack of

Insett p 319(red) (255 of 2C(b)

In "Modern Medical Science" for January 1903 Professor Rinata of Perugia says:

"In the spring of 1902 the Hospital Staff at Bologna were all revaccinated; it was composed of nine persons and with all there revaccination was "beautifully successful"; of these nine persons, five had smallpox and one died."

In "The Liberator" (Minneapolis) for June 1905 (p. 68b) we read, that three nurses, viz: Rebecca Blue Edna Hanson and Birdie Thompson in the Georgetown (D.C.) University Hospital, vaccinated and revaccinated of course, and all its 40 patients vaccinated, - were attacked with smallpox in March of that year. In the same journal, an account is given of a family named McDaniel living at 423 W 7th St St Paul Minnesota. Mrs Ida McDaniel a professional nurse, was not allowed to take charge of a case of smallpox until vaccinated. She vaccination "took"; also the smallpox; and as she had a very bad arm and the smallpox declared itself 15 days thereafter, after 5 days of prodromic sickness, it is pretty nearly certain that the smallpox was nivaccinated; though it may be that the lowering of her vitality by vaccination, evidenced by the "bad arm", and the living and breathing in an atmosphere of smallpox, may have been the cause. In fact all the family were vaccinated except one son who refused it - all had smallpox except this one who refused the vaccination.

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One reason, frequently assigned by both upholders and opponents of vaccination that the nurses are generally 'protected' by a previous attack of ox. For reasons which will be apparent to the students of this I do not accept this explanation of the immunity, but if the fact e, regard it rather as testifying to susceptibility, and seek else- e for the explanation of alleged immunity.

But Dr. Collins gave evidence of facts which of themselves pose of every claim to special immunity; he said :-

"At one time I had a staff that I was in the habit of employing who were so constituted in mind and body as to resist any infection. Those nurses that I employed were in constant attendance upon patients suffering from small-pox and fevers; they had never been vaccinated and had never had the small-pox and were living constantly in an atmosphere of contagion,.... none of them ever had it or have ever suffered in any way." (Rep: of Select Com:1871, Q.167-7)

At a meeting of the Surgical Society of Ireland on the first of March, 1872, Mr. Frank T. Porter, M.R.C.S. said:

"With reference to re-vaccination I have no faith in it. Not one of the thirty six attendants at the South Dublin Union Sheds has taken small-pox. Only seven of the number were revaccinated and as the remaining twenty-nine enjoy the same immunity, wherein is the necessity of the operation? I have known gouty inflammation, abscess of the breast, and angioleucitis to result from the operation."

So much for REvaccination according to Dr. F. T. Porter; and yet, marvellous influence of the prejudices of education and of inheritance Dr. Porter evidences that he still has faith in the prophylaxy of one vaccination! See his paper on "The Correlation of Varicella and Variola". Trans.Surg:Soc: of Ireland, 1872.

But after all, the alleged fact is not a fact. Numerous illustrations of this are on record: a few will suffice. At the Halifax Hospital, in April 1881, the matron and a nurse contracted small-pox; the matron had been previously vaccinated, and the nurse revaccinated only a week before she was taken ill. (British Medical Journal, May

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Medical Press and Circular March 27 1872

The small-pox was probably invaccinated in this case.

seventh, 1881. At the Lewes Fever Hospital a nurse was engaged, and Revaccinated November, 1881. She took small-pox a week afterwards and had it badly. She had been vaccinated in infancy and again when ten years of age. ¶ How little the medical press can be relied on to tell the truth when that truth will tell against the vaccination fetich is illustrated incidentally by the British Medical Journal for July seventeen, 1886 which stated that "no nurse at the Fulham Hospital had contracted small-pox since the institution was first opened". But the report of that very Hospital for 1881, gives of the staff (295 in number) FIVE as having taken small-pox, of whom FOUR had been REvaccinated.

259 of 2 e fo In the Sheffield epidemic, 1887-8, the 259 attack-rate upon all classes of the population was ~~as follows~~ ~~23 per 1,000 living : upon~~ 23. per 1,000 living

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In striking contrast to the above demonstrated failure of vaccination as a prophylactic, at Sheffield, is the immunity ~~to~~ which may be obtained without it ~~testified to~~, (unwillingly) by one of the most ~~intolerant~~ influential upholders of vaccination in France, Dr Colin, chief Medical officer to the hospital of Bicêtre, during the siege in 1870; In "La variole" (1873, p 114) he says:

"We have demonstrated.....that the ~~attend~~ hospital staff of Bicêtre has ~~been but~~ suffered little ~~kied~~ from small pox. There was absolutely no attack of it among the forty physicians and pharmacists attached to the hospital, nor among the forty "religieuses" who nursed our sick night and day and resided in the center of the hospital; numbers of these persons refused to yield to the advice I gave them to be revaccinated"

... vaccines, (Dr. Collins

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53 # See Supra Chapter XI. "Small-pox ingrafted Virus."

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259 of 2 C.O. In the Sheffield epidemic, 1887-8, the 259 attack-rate upon all classes of the population was ~~as follows~~ ~~23 per 1,000 living : upon~~ 23. per 1,000 living;

upon the picked class of soldiers in the barracks ~~it was~~ it was 14.4 per 1,000 living

upon the class, also picked, of the police force "" 26.8 " " "

upon the postmen it was - - - - - - - - - - - - - - - 0 " " "

But upon the Hospital Staffs also picked, assuredly for age, and probably for physique as well, it was 43.4 " " "

Naturally the death-rates give a similar comparison; they were as follows

Population all classes - - - - - - - - - - - - - - - 2.1 per 1000 living.

Soldiers - 0 " " "

Postmen - 0 " " "

The Hospital Staffs - - - - - - - - - - - - - - - - - 6.2 " " "

The student of this work will, I think entertain a strong suspicion that some of the cases of the nurses revaccinated at the Halifax Hospital and at the Lewes Fever Hospital were cases in which the disease had been invaccinated.# 56 (Royal (Br:) Com: 6th Rep 2.19.907)

Insert

~~William Job Collins (father of the D Collins member of the Royal Commission 1889)~~

Dr. ~~Collins~~ found that cowpoxing was attended with innumerable evils: by deteriorating the system and weakening the vitality, and that it often proved fatal. In some constitutions it imparts, or calls into activity, diseases that would otherwise remain dormant, such as syphilis, scrofula and other blood diseases. ~~(Ib 173)~~ ~~Rep of Select Comm &c~~ He found that diseases were transmitted from the vaccinifer to the vaccinee; (Dr. Collins

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See Supra Chapter XI. "Small-pox ingrafted Virus."

b. 237a 124 ~~307~~ 221

He mentioned in illustration two cases which came under his immediate notice of persons who died in the most hideous form of confluent small-pox, after vaccination and re-vaccination, which he ascertained had been complete.

~~He then narrated the cases of six un-vaccinated children who~~

237a ~~198~~

did not limit this statement to arm-to-arm vaccination, though 'calf-lymph' is not specifically mentioned.) This fact was for many years positively, ~~not to say~~ are even insolently, denied, with the use of language applied to all who alleged and PROVED it, more violently abusive than can elsewhere be found in even medical polemical literature. ~~Therefore~~

He mentioned the circumstance of two patients who had called upon him that day and said that they had been twice vaccinated, but wanted Dr. Collins opinion as to whether they were protected. He could detect no trace of vaccination on their arms and in his experience that was the case of about one third of all who have been vaccinated; so that if death occurred they would be returned as not having been vaccinated. He had had large schools and asylums to visit and had taken the trouble to make himself acquainted with this so-called protection, and found in many the scars nearly obliterated. In answer to Q.165 he said that in his opinion ~~mortality~~ death is just as likely to occur with a vaccinated patient as with an unvaccinated one and stated that he had carried the thing a little further and found that generally the unvaccinated consisted of the outcasts of society - inmates of prisons or work-houses, persons physicially and mentally low in the scale of human existence.

At. Q. 173, He stated :- "My opposition to vaccination is threefold, (1) I found that Cow-poxing was attended with innumerable evils, by deteriorating the system and weakening the powers of vitality and that if often proved fatal. (2) I found that there was no certainty in its operation. In some constitutions it calls into activity diseases that would otherwise remain dormant, such as syphilis, scrofula and other blood-diseases, and in my opinion it has been instrumental in swelling the bills of mortality to a most alarming extent."

He also states, Q.177 :- "I made myself thoroughly acquanited with the parents antecedents (i.e. of the vaccinifer) so that those who bought the so-called protection at my hands had an opportunity of going into everything that was necessary to prevent xxx the transmission of disease from one patient to another."

Before proceeding to vaccinate those who applied to him he warned them that it was attended with danger and that frequently small-pox and death occurred after vaccination.

He conceeded that the great bulk of the profession were in favor of vaccination because they pin all their faith upon the Jennerian hypothesis: he gives Jenner's words as follows :

> "Cow-pox admits of b eing inoculated on the human subject with the most perfect ease and security, and is attended with the singularly beneficial effect of rendering through life the person inoculated, perfectly secure against the small-pox.", and adds:
> "Now the great bulk of my professional friends pin all their faith upon what Jenner ~~saw~~ stated:"

He had not had and would not have his own children vaccinated.

A fact bearing upon general pathology and biology was mentioned by Dr. Collins which strongly supports the views put forward in this work, but which has generally escaped observation - after enumerating a large number of diseases resulting from vaccination and occurring in his own experience (including phthisis, to the incredulous wonder of Dr. Lyon Playfair) he was asked by the Chairman Q.191 :

> Did you ever see anything analogous to this disease of an animal in the human subject?" to which he replied:
> "I have often seen patients in the last stage of consumption with scrofulous joints, conical masses of proud flesh, from which exuded something resembling the fluid from a greasy-healed horse, and with this same fluid from the scrofulous joint of the human subject I have produced what some men would call a very good imitation of the Jennerian vesicle."

And in using what was and is called "Vaccine direct from the Cow," obtained by first giving the cow small-pox, and

> "my experience proved that in the use of this matter from the cow, <u>especially during an epidemic</u> of small-pox, it often produced the disease which it was supposed to prevent."

Dr. Collins showed that vaccination was a great cause of infant mortality, and exposed the fallacy of statistics which he showed practically compared small-pox deaths during epidemics in prevaccination days with like deaths where there was no epidemic in vaccination days, and showed that epidemics did occur in spite of vaccination and were just as fatal as before.

He attributed comparative freedom from small-pox to better habits, habitation and food.

d.

He gave distinct proof of cases of in-vaccinated syphilis, with-in his own experience.

He was savagely cross-examined, especially, by Dr. Robert Montague and by Dr. Lyon Playfair and by Sir Dominie Corrigan. Dr. Playfair seemed astonished that he should ~~venture~~ dare to assert that he had seen syphilis invaccinated, when such men as Ricard Channel Moreau, Maillard Roslan Volpean, the most celebrated syphilitic doctors in the world declared that in no case have they known syphilis introduced by vaccination.

Dr. Collins concedes that such a unanimity on their part was extraordinary, but as Dr. Collin's contention is now universally admitted to be a fact - our opinion of the value of Dr. Collins, and of the ... his testimony ought to be of the highest; and yet ... but ... lm- ... ing poor Dr. ... li- ness to confess that he was in error.

Insett p.237 of best copy:259 of 2nd.copy.

Dr Collins testified that diarrhoea is a by no means uncommon attendant upon vaccination,often terminating in ulceration of the bowels and sudden death (Select Comm:report Q.186);and in the third report of the Royal Committee,1889,Q.9458,the case of Henry Mould is given,in which an inquest was held,and the finding of the jury was that;"the deceased died from diarrhoea accelerated by vaccination,duly and properly carried out under the act."

The freedom of the parents of the syphilized children from all constitutional taint, was ascertained by ~~him~~ Dr Collins by careful examination. Insert. 260 Another common sequala of vaccination is Eczema. Dr Collins had ~~Had~~ seen children, theretofore healthy, with no trace of struma, after vaccination assume a scrofulous character, have every symptom characteristic of a strumous habit. Convulsions is by no means an uncommon thing after vaccination.# (54) When the lymphatics become inflamed, which is also a very common thing, you get enlargement of the glands of the axilla, and abscess. Pneumonia is a common attendent upon vaccination. Delirium is by no means an uncommon thing, and erysipelas, and phagedenic ulcers: pneumonia terminates in phthisis, generally (Ib.187-9) The original source of the true vaccine of Jenner is the greasy heel of a consumptive horse. Dr. Collins had often seen patients in the last stage of consumption, with scrofulous joints, conical masses of proud flesh, from which exuded something like the fluid from the greasy-heeled horse, and with this same fluid from the scrofulous joint of the human subject he had produc-

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(54) # Physicians have so long been cognizant of the fact, that any shock to the delicate organism of an infant is liable to cause convulsions, and for that reason alone, the profession ought to have been a unit against infantile vaccination. ~~- and child murder!~~

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He gave distinct proof of cases of in-vaccinated syphilis, with -in his own experience.

He was savagely cross-examined, especially, by Dr. Robert Montague and by Dr. Lyon Playfair and by Sir Dominie Corrigan. Dr. Playfair seemed astonished that he should dare to assert that he had seen syphilis invaccinated, when such men as Ricard Channel Moreau, Maillard Roslan Volpean, the most celebrated syphilitic doctors in the world declared that in no case have they known syphilis introduced by vaccination.

Dr. Collins concedes that such a unanimity on their part was extraordinary, but as Dr. Collin's contention is now universally admitted to be a fact - our opinion of the value of Dr. Collins, and of the weight to be given to his testimony ought to be of the highest; and yet I have never seen the slightest acknowledgment to Dr. Collins for his acumen, his courage and his self-sacrifice, made by any pro-vaccinist, but they continue to sound the praises of the men who **were wrong**; and of all the "great names" cited by Dr. Playfair in the hope of overwhelming poor Dr. Collins, Dr. Ricord is the only one who has had the manliness to confess that he was in error.

The freedom of the parents of the syphilized children, from all constitutional taint, was ascertained by him by careful examination.

Another common sequala of vaccination is Eczema. Dr. Collins had seen children, theretofore healthy, with no trace of struma, after vaccination assume a scrofulous character, have every symptom characteristic of a strumous habit. Convulsions is by no means an uncommon thing after vaccination.# When the lymphatics become inflamed, which is also a very common thing, you get enlargement of the glands of the axilla, and abscess. Pneumonia is a common attendent upon vaccination. Delirium is by no means an uncommon thing, and erysipelas, and phagedenic ulcers: pneumonia terminates in phthisis, generally (Ib.187-9) The original source of the <u>true</u> vaccine of Jenner is the <u>greasy heel of a consumptive horse.</u> Dr. Collins had often seen patients in the last stage of consumption, with scrofulous joints, conical masses of proud flesh, from which exuded something like the fluid from the greasy-heeled horse, and with this same fluid from the scrofulous joint of the human subject he had produc-

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(57) # Physicians have so long been cognizant of the fact, that any shock to the delicate organism of an infant is liable to cause convulsions, and for that reason alone, the profession ought to have been a unit against infantile vaccination. ~~- and child murder!~~

duced what some would call a very good imitation of the Jennerian vesicle; at one time he was in the habit of getting what they call "vaccine" direct from the cow; this is obtained by first inoculating the cow with small-pox and the ulcerous matter so produced is "vaccine lymph direct from the cow" and is used for vaccinating purposes. He said "My experience proved, that in the use of this matter from the cow, especially during an epidemic of small-pox, if often produced the disease it was supposed to prevent". (Ib.190-192)

Dr Collins said "Vaccination is not only useless but an evil, there is no doubt but that it has been instrumental in increasing infant mortality." Asked as to the age up to which he considers vaccination has that destructive effect, he says: "I believe from the first introduction of it, it deteriorates the system and weakens the power of vitality and lays the foundation of diseases which would otherwise not make their appearance."

761 — Pyaemia is sometimes produced by vaccination; wherever the veins become implicated you get blood-poisoning. Sir Culling Eardley died from it. It was at that time the general opinion of medical men that the 'lymph' could not convey any other disease: this opinion was put up to Dr. Collins to reprove him, but he stated that he had seen syphilis conveyed through the vaccine virus. The 'general opinion' now admits the fact, but forgets to thank Dr. Collins for pointing it out to them more than thirty years ago or even to blush for having laughed at and abused Dr. Collins and the other masters they derided for so telling them. As a professional man Dr Collins wished to leave it as his answer that "The unvaccinated nurses are as absolutely protected as the vaccinated against" small-pox. (It is to be hoped that posterity at any rate

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(759) The soundness of the view herein expressed by Dr. Collins has been abundantly verified by the statistics of infant mortality shown by the Registrar General's returns and extracted and presented to the Royal (Br.) Comm. 1889, in graphic form by Mr. Wallace, (See post chap.) But no statistics ought to have been needed to prove to every man with but a modest knowledge of Physiology, of Biology and of pathology that such MUST be the effect of introducing poison, and especially an organic poison into the life-stream - the blood. And although Dr. Collins and other learned and true physicians have over and over again presented these facts, - facts which it is impossible to deny, - to the profession QUACKERY, endowed and established by Law has been able to defy them.

(760) Yet fifteen other persons vaccinated from the same lymph as Sir Culling Eardley took no ill from it. Report of the Select Committee, Q.1,412.

will know how to appreciate the courage and learning of Dr. Collins and his self sacrifice for truth and humanity.)

Brudenell Carter, one of the first occulists of his time, in a paper communicated to the North London Medical Society March 8th. 1877 and reported in the Medical Examiner of May 24th. of that year said:

"I think syphilitic contamination by vaccine lymph is by no means an unusual occurrence, and that it is very generally overlooked, because people do not know either when or where to look for it. I think that a large proportion of the cases of apparently inherited syphilis are in reality vaccinal and that the syphilis in these cases does not show itself until the age of from eight to ten years; by which time the relation between cause and effect is apt to be lost sight of."

Many advocates of vaccination, and the deluded and deluding writers in the press, will say as to this that "tho' it was true when arm-to-arm vaccination was in use, ~~but~~ now that 'calf lymph' is employed syphilitic contamination is impossible." This assertion is unfounded. As has been abundantly shown by Dr. Creighton, Dr. Crookshank and by the pro-vaccinist Jonathan Hutchinson, cow-pox itself often produces lesions which "the most skilled syphilographers cannot distinguish from the symptoms of syphilis". Further it has been shown in this work that human variolous poison inheres in the pedigree of every vaccine material in use in the United States; also that in the methods now used to procure a stock of vaccine material in Europe, in America and in Asia, the starting point is always the human variolous virus, and Be'champ's discoveries show the peristance of the micro-zymas of all cells, of all beings, healthy or diseased.

It must not also be forgotten that until the testimony laid before the Royal (Br:) Commission of 1889 rendered such statements ridiculous, it was insisted upon by all official doctors and by that curious and shifting thing the so-called "concensus of medical opinion", that provided " no blood was drawn" syphilis could not be conveyed by arm-to-arm inocculation - at least it was later added - if the syphilis were only latent in the vaccinifer, and loud mouthed abuse was poured upon all who dared maintain the contrary.

Dr. James J. Garth Wilkinson (57) reported some cases of disease inoculated by vaccination in patients brought to him for treatment. One of the name of Twine who had been vaccinated the twenty-seventh of September, 1870, having been in perfect health, suffered terribly ever since and died on the tenth of March, 1871. Another case was thus described by the Mother:

"The child was in perfect health in May, 1863. As small-pox was prevalent, and the household was being vaccinated, she was subjected to the same process, though she had been vaccinated well when four months old. Within a few days of the vaccination in May, 1863, she being then nearly six years old, was attacked with inflammation of the lymphatic glands of the arms to so severe an extent that her arms were immensely swollen, so heavy and hard that each arm had to be supported on pillows. Her sufferings for ten days were very great, at the end of which time her arms gradually assumed their natural appearance. Within a few weeks she was prostrated by an attack of aphthous ulceration of the mouth, most distressing from the odor emitted from ths gums. She was more or less delicate ever after, and in the following June enlargement of the abdominal glands and mesenteric disease set in, her life being terminated by a succession of abscesses in the bowels, in July 1864."

The father of the child was the head clerk at Baring's.

Dr. Wilkinson was asked how he connected those diseases described with the vaccination? The reply conveys so much instruction that never was more needed than at present, that I think it worth while to transcribe it fully.

"In the first place there is the vaccination itself, there is poisonous lymph producing poisonous lymph, that is diseased lymph: in the second place, there is enormous swelling of the cellular tissues, and consequently of all the tissues of the arm. The cellular tissues are, in fact, the great plane at the base of the whole lymphatic system, the universal lymph plane. The next stage, the malignant thrush was no doubt a commencement of destruction in the lymphathic system of the abdomen. Affections of the mouth and all those parts are very often nothing more than symptoms of what is going on in the liver, or the stomach, or the small intestines, and so forth: and I apprehend that the thrush was the beginning of a manifestation of a break up in the lymphatics. In the fourth place, the centre of the vaccination was reached, and the abscesses in the abdomen were the end of it."

Dr. Wilkinson observes further:

"If medical men were to study more the connections of the body, and

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57 Emerson thus speaks of Dr. Wilkinson: "A philosophic critic, with a coequal vigor of understanding and imagination comparable only to Lord Bacon's and "With a Rhetoric like the armoury of the Knights of old". (Quoted from "The Story of a Great Delusion" by William White, p.549.)

particularly the great tracts through which the lymph circulates, they would get very different ideas of vaccination from what they have now."

I am of the same opinion, and it is in the hope of stimulating such study that I have quoted this opinion of the venerable physician, Dr. Garth Wilkinson.

Dr. Wilkinson then related a striking illustration of the influence of what he calls the 'vaccination power' in the medical as in the public mind, causing in the minds of a highly cultivated family complete forgetfullness of a serious mischief in the family caused by vaccination, until his refusal to vaccinate the family during a small-pox scare brought it back to their recollection — and them to goodsense.

He told the Select Committee that in his opinion the evil consequences of vaccination are wide-spread and very serious; grounding that opinion upon his own experience, and as the result of his inquiries within the last three years and arguing that if other medical men were to do the same, the cases would crop up in enormous numbers and that the convictions of the profession would gradually sway round against it. (Report of Select Comm., Q.1334) He denies that "the common sentiment of the profession that only in cases of impure lymph can any foul disease be conveyed by Vaccination" is a well-founded doctrine and exhibits the absurdity of speaking of 'pure lymph' in connection with cow-pox. In explanation of the great preponderance of medical opinion in favor of vaccination, he says, "You have not merely scientific investigation here: you have an enormous prestige attached to these things, and there are very powerful interests which prevent most medical men from ever investigating the subject." He thinks that 99 out of 100 of the profession have never looked at the other side of the question at all; they are so supported by their brethern, and it is so entirely secundem artem that they cannot think about it. He also points to the strong pecuniary interest in upholding it. (Ib. 1340; 1413-30)

Note to page 240

(58) This pecuniary interest has been multiplied many times since the day Dr Collins testified before the Committee of the House of Commons. It is I believe true that the medical profession numbers today and has always numbered a larger proportion of self-sacrificing members than does any other profession or calling; but medical men are but men, they are men too, seeking to earn a living in a crowded and struggling profession; and the possession of a piece of parchment giving them the right to append the letters "M.D." to their names, does not change their natures, nor make them other than men subject to all the failings and with the virtues of mankind. It was but truly said by that: "If there were any large interest involved in a denial of gravitation the laws of gravitation would be denied". The interests involved today in upholding vaccination are enormous. To make even an approximate estimate of them in any large community is, for the present, impossible. But a partial one has been made for the small country of Belgium of the probable profit to the profession of vaccination alone; and this does not include the profits of the manufacturers, nor any estimate of the capital embarked in the manufacture of these poisons. This estimate has been made by Dr: J. Vandevogel, and is published in "Le Médecin" for June 1903. Substantially it is as follows:

There are in Belgium 6,000,000 persons to be estimated on; these are first vaccinated in the cradle, next on admission to school, again as to the males on entering the army and there are the females (a minority) who enter the higher schools or the public service or the railroad service. To be within the truth multiply the six millions by two and one half to get at the number of vaccinations in each doctor's life-time, or 15,000,000. It would really be in each 21 years of that life. This at two francs each amounts to Frs: 30,000,000 which divided among three thousand practitioners yields an average of Frs: 10,000 for each doctor. Then we have the great increase of sickness caused by the vaccinations, which are nearly all of a chronic type, but the money value whereof to the profession cannot be estimated even for the little country of Belgium. Then we have the law making it for the strongest manner to the pecuniary interest of the profession and of its several members to remain ignorant, and how rare must be the case in which in spite of all such interests the love of truth and of humanity shall incite a man to seek the truth as it really is with regard to vaccination!

In connection with the damaging influence of pecuniary interest upon the judgment, the following observation of Prof: Huxley, contained in a note to the fourth page of his article "Agnosticism; A rejoinder" (1889) and which will be found on p. 266 of the volume "Science and Christian Tradition" D. Appleton & Co:, New York, 1899 is pertinent:

"Imagine that all our chairs of Astronomy had been founded in the fourteenth Century, and that their incumbents were bound to the Ptolemaic articles. In that case, with every respect for the efforts of persons thus hampered to attain and expound THE TRUTH, I think men of common sense would go elsewhere to learn Astronomy."

Even Dr. Acland admitted that Pyrexia often accompanies vaccination, and "reaches its maximum generally before the eighth day" and says "These slight(?) disturbances are often the only evidence of a general diffusion of the virus, although eruptions, such as erythema, roseola, or urticaria may accompany even the mildest and most favorable case of vaccination".# 59

It is not to be forgotten that these rashes are in nearly all cases accompanied by great irritation, ~~a~~ itching, and that this causeless suffering is inflicted generally upon helpless children, often upon infants at the time when all the powers of nature are specially needed to develop a healthy body and mind. The result cannot be other than injurious to the future vitality of the victim, and is a main cause of the deterioration of the race, proofs of which have been adduced by the ablest physicians for more than 60 years past, for which a simulation of investigation is now promised by the Local Government Board of England, with an express exclusion of inquiry into vaccination as a cause!

In the same article from which the above is quoted, Dr. Acland says:

> "Among the more usual complications which occur at or about the period of the full development of the pocks are those which are common in all the acute exanthems: they consist of headache (in adults and elder children), lassitude, irritability, sleepness-ness, disturbance of the digestive system-such as anorexia, vomiting, catarrhal diarrhoea; and possibly during the onset of the vaccinal fever, rigors may occur in adults and in the re-vaccinated, and convulsions in children. In relation to these indications of a general infection, in some instances there will be evidence of ~~XXXXXXXXXX~~ corresponding disturbances of the circulatory or respiratory apparatus, as shown by increased rapidity of pulse and respiration, bronchial catarrh, a slight temporary albuminuria."

And Dr. Louis Frank in the Journal of Cutaneous and Genito-Urinary Diseases, N.Y. April, 1895 says: "Adenitis is quite a common complication of an otherwise normal ~~XXXXXXXXXXX~~ ~~cause~~ course of vaccination."

Om lead ~~lead~~

Mr Thomas Wainwright, in the "Medical and Physical Journal" for Nov 1805, Mr Ross in a paper read before the Medical Society of London April 7th 1857 Reported in the London "Lancet" of Feb: 14, 1857, Dr J. Morrow, in the "Journal of Cutaneous and Venereal disease, New York March 1883 all admit that obstinate cutaneous eruptions frequently follow vaccination.

Allbutt's System of Medicine — "Vaccinal Injuries." vol II London 1897

~~59~~ 59

Vol. II. Chapter VIII.

Dr. William Osler, who has recently been called to fill the chair of at the University of Oxford England and whose authority no pro-vaccinist may dispute, in his "practice of Medicine" New York, 1898, p. 71 says under the heading

> "b. Generalized Vaccinia" "It is not uncommon to see vesicles in the vicinity of the primary sore. Less common is a true generalized pustular rash developing in different parts of the body, often beginning about the wrists and on the back. The secondary pocks may continue to make their appearance for five or six weeks after vaccination. In children the disease may prove fatal."

Illustrations of "generalized vaccinia", whereof one proved fatal are to be seen in the Atlas plates XXIV & figs. I and II

With such a confession, is it not a marvel that such a man as Dr. Osler can continue to uphold the universal practice of a rite, as a supposed protection against a diseased condition which affects but a small proportion of the people and which itself is as described by Sydenham, "if no mischief be done by physician or nurse the lightest and safest of all diseases."

Continuing the consideration of Vaccinia Dr. Osler says: "c. Complications.....the vesicles may inflame, and deep excavated ulcers result, sloughing and deep cellulitis may follow....."Quoting Dr. Aclaud he says:

(1) during the first three dyas there may be looked for Erythema, Urticaria, vesicular and bullous eruptions; erysipelas;
(2) After the third day, and until the pock reaches maturity: Urticaria; lichen urticatus, erythema multiforme, erysipelas;
(3) About the end of the first week; generalized vaccinia; impetigo; vaccinal ulceration, glandular abscess; septic infections, gangrene;
(4) After the involution of the pocks, invaccinated diseases; for example syphilis.

d. Transmission of diseases by vaccination. Syphilis has undoubtedly been transmitted by vaccination, but such instances are very rare.....the question has now become really of minor importance since the widespread use of animal lymph."

Here (in d), are three two assertions--both erroneous. In estimating the value to be placed upon assertions of this character, introduced without any evidence to support them, it is well to recollect first: that for upwards of seventy years during the whole of which time

vaccination has been urged, and in ~~some~~ many places forced upon the people, the mere possibility of syphilis being invaccinated was insolently denied, and all sorts of abuse lavished upon the wise and patient physicians who observed and clinically described cases of such inoculation; secondly that so far from invaccinated syphilis having been very rare, or even rare at all, Dr. Bulkely for many years professor of Dermatology -------- at the post-graduate medical school of New York in his "Syphilis of the innocent" published in 1894 and therefore four years before Dr. Osler's work was published, enumerates 1863 cases and 29 epidemics of invaccinated syphilis which could not be denied. Of course these are but a fraction of the whole numberof occurrences of this class; and thirdly that by the late Dr. Boëns of Belgium by Drs. Creighton and Crookshank of London (England) and I think also in this work, it has been established, that the proper analogue of the pox in cows is syphilis in man; and that the latter has often been the cause of outbreaks of the former.

Among the curious and rash assertions of some physicians, dictated doubtless by the desire to advance the practice of vaccination, was one that vaccination had a beneficial influence upon existing diseases. Dr. Archer recommended it as a cure or palliative in whooping cough, and so recently as the year 1888 Dr. A Grinnell then dean of the Medical department of the University of Vermont, postponed the vaccination of his children in order that they might be vaccinated when they caught whooping cough, which he thought they were sure of doing as there was an epidemic of that condition at the time in Burlington.
At p. 72 of this above quoted work Dr. Osler gives Montreal as an illustration of the necessity for vaccination as a protection against smallpox; he says:

> "Between the years 1876 and 1886 a considerable unprotected population grew up and the materials were ripe for an extensive epidemic. The soil had been prepared with the greatest care as already stated, with the Pulman Car Conductor from Chicago on the 28th February 1885. Within the next ten months thousands of persons were stricken with the disease and 3164 died."

I am anxious to believe that Dr. Osler desires to be truthful, that he really believes that the statements he makes are true; but it needs a large charity to give him such credit in the face of the above statements. The Montreal fable had been so frequently exposed at the time Dr. Osler published his "practice" that it is hard to realize how it was possible for Dr. Osler to keep himself out of its way.

Now in the first place, in 1879 Dr. Emery Coderre for thirty years physician at the Hotel Dieu Montréal showed that vaccination had been rigorously enforced, that the people-almost to a man--had been vaccinated and revaccinated and again vaccinated, and the late Dr. W. B. Carpenter, in a pamphlet addressed to Sir Lyon Playfair in 1883 admitted that Vaccination was "as well carried out in Montreal by its officers of Health as in the other great Cities of the Dominion." and as a consequence thereof he avers:"small pox has become almost entirely extinct."

With regard to the outbreak in 1886 Dr. Coderre wrote to ~~Dr.~~ Wm. Tebb a letter dated July 5th, 1886 which was published in the Vaccination Inquirer for Dec. of that year in which-after contradicting the assertion that it was introduced ~~by two persons~~ from Chicago he says: "The epidemic originated at the Hotel Dieu, in consequence of vaccination"of this he gives abundant illustration, and as the student of this work has seen, the variolous virus has been introduced into all the vaccines in use upon the continent. I need not therefore repeat Dr. Coderre's illustrations, but refer those who desire further evidence to the original letter. In the Montreal Star of July 31st, 1886 and in the Vaccination Inquirer for February 1905 will be found a record of post-vaccinal deaths which followed the intensive vaccinations practiced in Montreal in 1885 and in Dr. Tebb's "A Century of Vaccination" he will find the cause: Dr. Garceau, a strong believer in Vaccination, quoted by Dr. Tebb said "I attribute the chief cause to the frightful system of cesspits, and the insanitary condition of the place generally. It is unclean, and unless some action is

> taken to clean the foul vaults and remove all garbage, the City will next season be in excellent shape for Cholera, or any other equally contagious disease."

other evidence of the filthy condition of the City is given in the Vaccination Inquirer Vol. XXVI p. 220 and in an article from The Montreal Mail, November 1885 quoted in the same number of the Vaccination Inquirer it is said: "Three of the wards contributed 90 per cent of the deaths. It is in these wards that the ten housand cesspits exist which breed the smallpox, etc."

Will Dr. Osler learn from this exposure of his, no doubt unintentional, errors not to keep himself out of the way of truths, however unsatisfactory they may be to his theories?

testified before the Select Committee. He

AAron Emery had a son William, healthy till vaccinated, at eleven weeks old. He was vaccinated by Dr. Allen of Soho Square on the thirty-first of May, 1869. He made four punctures and on the ninth day, the arm swelled to twice its matural size and was very painful. He immediately sent for the Doctor (Dr. Allen) The child got constantly worse; the poor little fellow had no rest night or day from the ninth of June to the fourth of July, when death put an end to his sufferings. The swelling went from his arm to the whole of his body and legs. At first it was red, then red and green. Mr. Emery also called in Dr. Harrison, ~~he is~~ a member of the Royal College of Surgeons; he said at once that there was no possible hope for the child; that he could do no good, the blood was poisoned. Dr. Allen certified the cause of death to be Erysipelas, and refused to mention vaccination. Mr. Emery then insisted on an inquest. Dr. Lankester who was the coroner refused to allow Dr. Harrison to testify at the inquest. The Jury returned a verdict "died from Erysipelas caused by vaccination". Dr. Lankester falsified the verdict of the Jury in the return he made to the District Registrar by adding the word "misadventure". He had requested the Jury to add that word to their verdict and they expressly refused to do so. The post mortem proved the child to have been healthy except for the vaccination. Dr. Clark stated the death was due to Erysipelas, consequent on vaccination. Mr. Emery sent a statement of the facts to the London press, but the papers generally refused to publish it, but he got in into a local paper. Up to this time he had not been a member of any anti-vaccination Society. Mr. Emery had seen from one hundred to one hundred and fifty children suffering immediately after vaccination, and had lately seen four cases of nasty ulcerous sores upon the faces of children in Cleveland Street. Had also been to the vaccination station in Whitfield Street several times and had seen the poor children when brought back the week following their vaccination the arms inflamed from elbow-joint to the shoulder and screaming with pain. He had lately seen three deaths from vaccination, one at Shad-

well, one his own son, and one at Saint James' Vestry Hall. The victims were all well until vaccinated.

Mr: Covington testified before the select Committee of the House on the 21st: March, 1871. He decribed the cases of Cosford, Warr and Green mentioned below and of others, and (Q. 2,138) related that of Mr: William Hoddle of Chapel Gardens, aged thirty who was vaccinated as a child, and at the age of twenty-four was revaccinated on entering the militia. Eight days after he had, as it was called "a fine arm", and on the eleventh day felt ill;--he had the Smallpox! There can now be little doubt but that the smallpox was IN-vaccinated, and about the same time a Mr: Rawls of Cleveland Road, Northampton [illegible] and four of the same family were vaccinated and two of them had "Vaccinia" and smallpox concurrently.

In the case of Hoddle and of the above two members of the Rawls family, the usual excuse that the disease was incubating at the time of vaccination, was put forward, and (Q. 2,292,) the chairman said: "Are you aware that the incubation of smallpox when it first appears is twelve days?"

As elsewhere observed the "period of incubation" idea has been adopted to explain certain phenomena which appear to give color to the theory; but those phenomena are equally explicable on totally different grounds; the incubation theory has been assumed on insufficient grounds and as will be further shown hereafter needs to be re-examined.

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Annie Covington, eldest daughter of Frederick Covington was vaccinated in childhood, up to which time she had been the healthiest of the family. Immedately following vaccination she feel ill and continued so for several months. On recovering (?) abscesses formed and ~~brk~~ broke out in three places, surrounding the punctures on the left arm, and one likewise on the left side of the ~~bowels~~ abdomen; she continued to suffer from boils for over three years. Dr. Hewitt attended her. (Rep. of Select Com. of the H. of C., 1871, Q.2103-4, 2222.)

Mr. Cosford of Copenow Mills, Cogenhoe, Northampton, had a child of four months, perfectly healthy till vaccinated in 1863. It began immediately to droop; sores broke out all over the body, the ears and eyes were affected and it died at ten months, the certificate stating 'convulsions' as the cause of death. (Ib.Q.2121.)

Mr. Main Wilson Warr of Farcotton Northampton, had a daughter, perfectly healthy till vaccinated when not quite three months old, when she became an intense sufferer for twelve months. The child became full of eruption from head to foot. Its ears became almost severed from its body. The mother was afraid to lift the child lest the ears should adhere to the pillow.(Ib.2125-8)

A not very healthy child of Mr. Green of Upper Mounts was vaccinated at two years of age. At first it did not seem to take, but at the end of a month a scalding discharge burst from the ear, as though it had been pent up. Mortification ensued and it died in nine months. from the date of vaccination.
(Ib. 2132.)

Mrs. Elizabeth Kemp produced her child to the Select Committee on the twenty-first of March, 1871, it was then eight months old: Dr. Rogers of Dean Street had vaccinated it about seven weeks before. Up till the day of its being vaccinated it was a healthy child except for a slight sore on one side of the head. As the arm began to take, the face and ears broke out. The scars on his face ~~are now to be~~ were seen by the Committee

V. supra. Boils following illness supervening upon vaccination.

~~334~~ ~~141~~ ~~245~~ 139 ~~204~~ ~~223~~ ~~399~~ ~~320~~

You could only just see his eyes. This was three or four days after the vaccination, the eruption lasted about three weeks. (Ib.2294-2316). A gentleman (Dr. Collins) who was present at the time the child was exhibited to the Committee described it to the author in 1899 as a dreadful looking object.

Thomas Baker, Barrister-at-Law, had been engaged in the Office of the first general Board of Health from 1849 to 1854 and had given much attention to sanitary questions, had frequently seen an infant, perfectly well till vaccination, suffer from eczema ever since. It would break out some weeks after ... Insett

~~399~~ ~~320~~ 334

Insett p.245 of best co:

Mr:Baker had been for more than twenty years a shareholder in the Metropolitan Association for improving the dwellings of the industrial classes and had acted as Auditor thereof for seventeen years and although the dwellings of the Association were dropped down in one of the worst fever nests of Londdn they save an average of from seven to ten per thousand in the mortality. He ~~XXXX~~ referred to the returns of the Registrar-general as showing that this was especially so in the case of small-pox and he claimed that the true prophylactic against small-pox is CLEANLINESS!

... rose up into a great-lump. The House-Doctor said to the child's Mother "Is it not better for one in one thousand to die like this than to have the small-pox raging all about our towns as it has done before?" ~~#69~~ (61)

The child continued to get worse, the sores eating into holes. In

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~~#69~~ (61) Even if Vaccination were the prophylactic it is pretended, this very claim would condemn its employment, even without taking into consideration the torture of its victims. If one in 1,000 die 'like this' that means an addition to the mortality of one in 1,000 living, or 1,000 per 1,000,000 each year. Now it is only in years of severe epidemic that the small-pox mortality attains to 1,000 in 1,000,000 and it still claims its toll in spite of vaccination; a few yearly, and many in epidemic years. But this 1,000 per 1,000,000 is an avoidable addition to the death roll. Now suppose that there were executed in New York City, 3,000 persons yearly for crimes of which they had been convicted : or 5,000 in London, or 70,000 in the whole United States or very nearly twice the number that there are of prisoners in the penitentaries for all offences added together, would not a cry of horror rise up from Maine to California? I do not claim that the death roll from vaccination is so heavy as what this house surgeon's estimate would amount to, but that it is a very heavy one we shall have good reason to conclude when we examine only slightly the statistics of the subject. And in contrasting the number of the victims of vaccination with that of convicted criminals, it is to be remembered that the former are in nearly all cases HELPLESS CHILDREN, whom all but hopeless savages are ready to give their lives to protect.

~~334~~ ~~141~~ ~~245~~ 139 ~~204~~ ~~223~~ ~~399~~ ~~320~~

You could only just see his eyes. This was three or four days after the vaccination, the eruption lasted about three weeks. (Ib. 2294-2316). A gentleman (Dr. Collins) who was present at the time the child was exhibited to the Committee described it to the author in 1899 as a dreadful looking object.

Thomas Baker, Barrister-at-Law, had been engaged in the Office of the first general Board of Health from 1849 to 1854 and had given much attention to sanitary questions, had frequently seen an infant, perfectly well till vaccination, suffer from eczema ever since. It would break out some weeks after vaccination. Inselt ~~(See post for Mr. Baker's opinion as to the best means of prophylaxis against epidemics, p.)~~

Mrs. William Joseph Addison of West Block, Peabody Buildings, had a child born about the first of June, 1870. It was in perfect health till vaccinated on the eighth of September, 1870 by Mr. Ross. Three days afterwards it broke out in a most fearful rash in the lower part of the body and continued to increase each day, getting worse and worse for eight weeks. It was taken to the Ratcliff Cross Hospital about the seventeenth of September. The child got worse and worse, eating into holes, and on each side its thighs rose up into a great-lump. The House-Doctor said to the child's Mother "Is it not better for one in one thousand to die like this than to have the small-pox raging all about our towns as it has done before?" # ~~(60)~~ (61)

The child continued to get worse, the sores eating into holes. In

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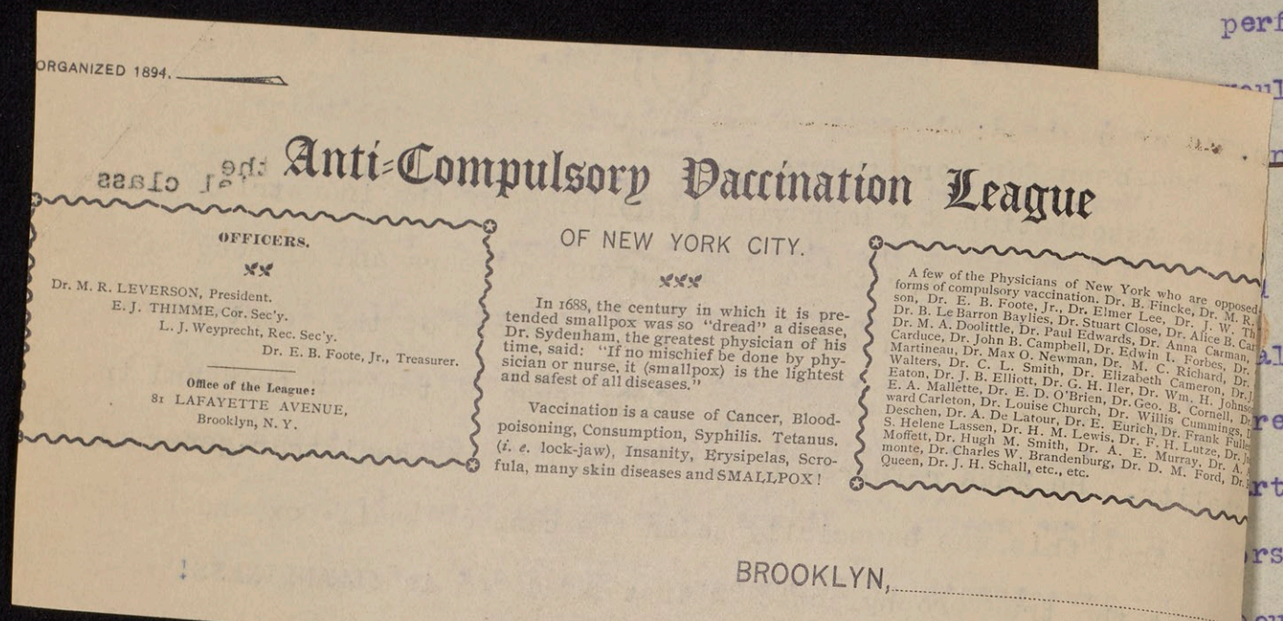
~~(61)~~ (61) Even if Vaccination were the prophylactic it is pretended, this very claim would condemn its employment, even without taking into consideration the torture of its victims. If one in 1,000 die 'like this' that means an addition to the mortality of one in 1,000 living, or 1,000 per 1,000,000 each year. Now it is only in years of severe epidemic that the small-pox mortality attains to 1,000 in 1,000,000 and it still claims its toll in spite of vaccination; a few yearly, and many in epidemic years. But this 1,000 per 1,000,000 is an avoidable addition to the death roll. Now suppose that there were executed in New York City, 3,000 persons yearly for crimes of which they had been convicted : or 5,000 in London, or 70,000 in the whole United States or very nearly twice the number that there are of prisoners in the penitentaries for all offences added together, would not a cry of horror rise up from Maine to California? I do not claim that the death roll from vaccination is so heavy as what this house surgeon's estimate would amount to, but that it is a very heavy one we shall have good reason to conclude when we examine only slightly the statistics of the subject. And in contrasting the number of the victims of vaccination with that of convicted criminals, it is to be remembered that the former are in nearly all cases HELPLESS CHILDREN, whom all but hopeless savages are ready to give their lives to protect.



ORGANIZED 1894.

Anti-Compulsory Vaccination League

OF NEW YORK CITY.

OFFICERS.

Dr. M. R. LEVERSON, President.
E. J. THIMME, Cor. Sec'y.
L. J. Weyprecht, Rec. Sec'y.
Dr. E. B. Foote, Jr., Treasurer.

Office of the League:
81 LAFAYETTE AVENUE,
Brooklyn, N. Y.

In 1688, the century in which it is pretended smallpox was so "dread" a disease, Dr. Sydenham, the greatest physician of his time, said: "If no mischief be done by physician or nurse, it (smallpox) is the lightest and safest of all diseases."

Vaccination is a cause of Cancer, Blood-poisoning, Consumption, Syphilis. Tetanus. (*i. e.* lock-jaw), Insanity, Erysipelas, Scrofula, many skin diseases and SMALLPOX!

A few of the Physicians of New York who are opposed forms of compulsory vaccination. Dr. B. Fincke, Dr. M. R. son, Dr. E. B. Foote, Jr., Dr. Elmer Lee, Dr. J. W. Th Dr. B. Le Barron Baylies, Dr. Stuart Close, Dr. Alice B. Car Dr. M. A. Doolittle, Dr. Paul Edwards, Dr. Anna Carman, Carduce, Dr. John B. Campbell, Dr. Edwin I. Forbes, Dr. Martineau, Dr. Max O. Newman, Dr. M. C. Richard, Dr. Walters, Dr. C. L. Smith, Dr. Elizabeth Cameron, Dr. J Eaton, Dr. J. B. Elliott, Dr. G. H. Iler, Dr. Wm. H. Johnso E. A. Mallette, Dr. E. D. O'Brien, Dr. Geo. B. Cornell, Dr. ward Carleton, Dr. Louise Church, Dr. Willis Cummings, Deschen, Dr. A. De Latour, Dr. E. Eurich, Dr. Frank Fulle S. Helene Lassen, Dr. H. M. Lewis, Dr. F. H. Lutze, Dr. J Moffett, Dr. Hugh M. Smith, Dr. A. E. Murray, Dr. A. monte, Dr. Charles W. Brandenburg, Dr. D. M. Ford, Dr. Queen, Dr. J. H. Schall, etc., etc.

BROOKLYN,

the Hospital they put on a board over the child's bed "Hereditary Syphilis" and it was treated with Mercury. It died in four weeks all but a day. The Doctor put in the certificate of death "Hereditary Syphilis" as the cause. The parents demanded that he put in plain words death from vaccination. He would not do that. The parents and a second child were examined and it was apparent that they were absolutely free from all constitutional disease. The Surgeon then added "attributed to Vaccination", but this did not satisfy Mr. Addison and he insisted on an inquest being held. An inquest was then ordered, but Mr. Addison was not allowed to be present and few of the witnesses were examined. It was clear to all that the affair was to be hushed up: it was so clear a case against vaccination that they would not let it go on. The Police Surgeon who made the post mortem said that vaccination was the cause of death. The Jury brought in a verdict of Pyaemia. Since the death of his child Mr. Addison has heard of hundreds of cases, not all of death but of suffering for years from vaccination. The story of Mr Addison as it was told before the Select Committee Insett Mrs. W. Hume-Rothery had regarded vaccination as being as

Insett p.246 of best co:

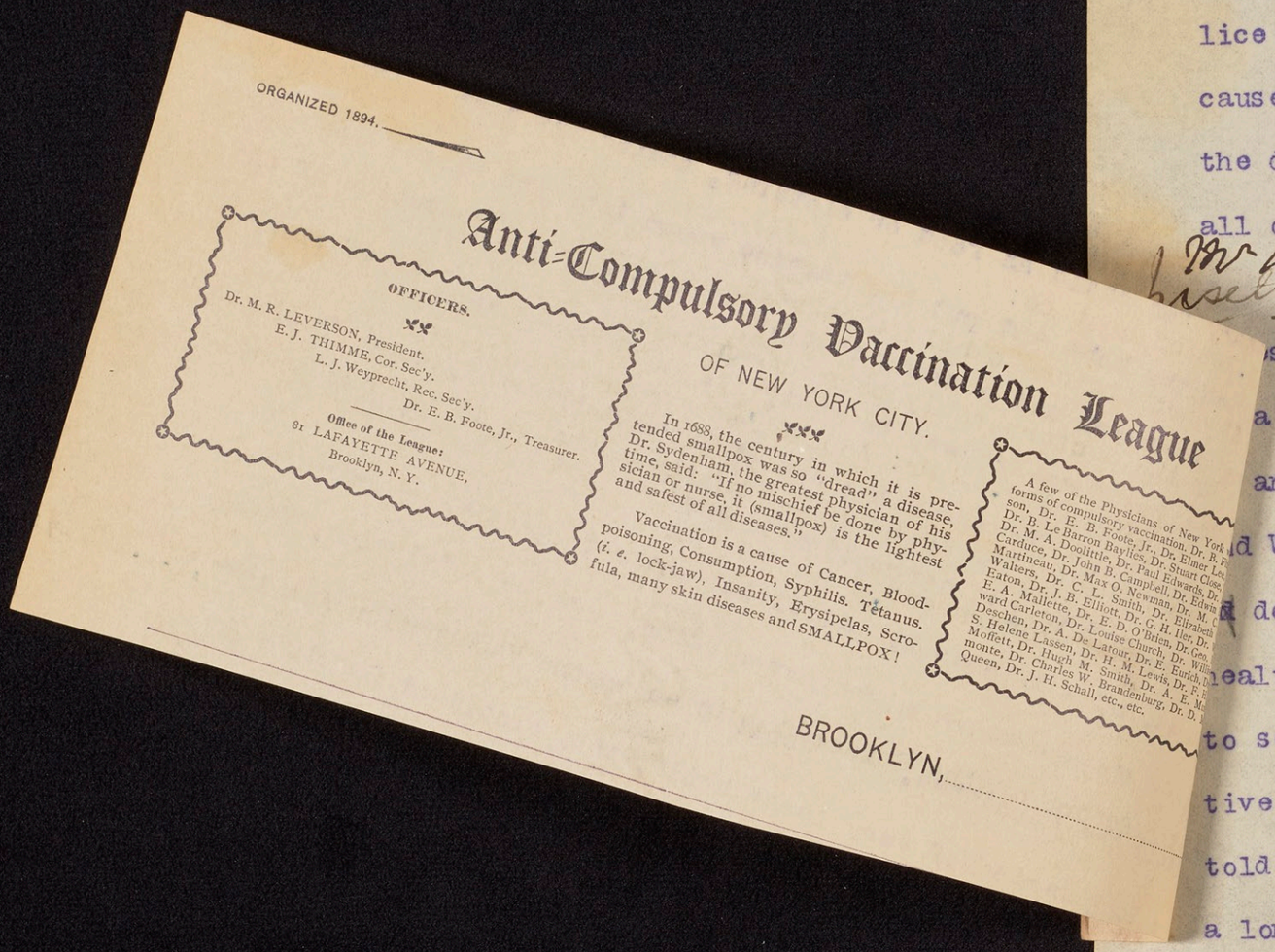
is a most pathetic one of child torture and of ignoble persecution of the parents by the doctors, nobly born and contested for the sake of their children and humanity. Mr: Addison's exposure of official falsehood and suppression ought not to be lost upon those who claim to possess the faculty for self-government, #

See the Report of the Select Committee on the Vaccination Act 1867, p.p.135-7

The child was a very strong one; it did not cut a tooth for six months afterwards. ### (Rep. of Select Com. Q.2465-68.)

The student will Remember the account of the author's suffering from boils as the result of his own experimental vaccination. Supra, p.

Delayed and difficult dentition and decay of teeth are frequent results of vaccination, see Mr. Carter's "experience from many lands", quoted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BROOKLYN, ...

335 ~~140~~ 140 ~~246~~ 20~~5~~ ~~400~~ ~~321~~

the Hospital they put on a board over the child's bed "Hereditary Syphilis" and it was treated with Mercury. It died in four weeks all but a day. The Doctor put in the certificate of death "Hereditary Syphilis" as the cause. ~~We~~ The parents demanded that he put in plain words death from vaccination. He would not do that. The parents and a second child were examined and it was apparent that they were absolutely free from all constitutional disease. The Surgeon then added "attributed to Vaccination", but this did not satisfy Mr. Addison and he insisted on an inquest being held. An inquest was then ordered, but Mr. Addison was not allowed to be present and few of the witnesses were examined. It was clear to all that the affair was to be hushed up: it was so clear a case against vaccination that they would not let it go on. The Police Surgeon who made the post mortem said that vaccination was the cause of death. The Jury brought in a verdict of Pyaemia. Since the death of his child Mr. Addison has heard of hundreds of cases, not all of death but of suffering for years from vaccination. The story of Mr Addison as it was told before the select Committee himself Mrs. W. Hume-Rothery had regarded vaccination as being as [illegible]ssary for a child as food or clothing, seeing the doctor lance the arm [illegible] a healthy babe and put the vaccine venom into its blood, said: "this [illegible] an unnatural and a wrong thing." This led the husband, the Rever[illegible]d William Hume-Rothery to study it. He found that vaccination was [illegible] delusion. To wound the arm of a child literally over-flowing with [illegible]ealth, and to put corruption into its blood to shield it from small-pox, to set up a disease by artificial means to protect it against a prospective disease which might never occur, must be a delusion, Mr. Rothery told the Committee. About three months afterwards the little tot had a long series of very large boils; ~~###~~ 67 (63) they continued for five or six weeks# The child was a very strong one; yet it did not cut a tooth for six months afterwards. ~~###~~ 69 (Rep. of Select Com. Q.2465-68.)

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63) ### The student will Remember the account of the author's suffering from boils as the result of his own experimental vaccination. Supra, p.

64) ### Delayed and difficult dentition and decay of teeth are frequent results of vaccination, see Mr. Carter's "experience from many lands", quoted

The daughter of Samuel Scholes, silk manufacturer of Middleton, was nine months old when vaccinated, up to which time she had been a very healthy baby. After vaccination she was afflicted with sore eyes and continued to be so afflicted for many years. It was afterwards discovered that sore eyes prevailed in the family of the child from which she was vaccinated. ~~###~~ ~~(65)~~ (65)

270 12 Co John Horrox, silk dyer, had a boy,,exceedingly well until vaccinated, and was never well afterwards. The child's flesh was rendered unsound: it rotted on the slightest scratch with a pin; now and then it broke out with scabs and sores. Six other children, vaccinated from the same vaccinifer, also died from vaccination. The vaccinifer was said to be syphilitic, but the parents were thoroughly good people and believed to be incapable of falsehood. (Ib.Q.2496-2503) ~~####~~ (66) ~~(64)~~

John Reed, son of Ann Reed, widow, was a healthy boy until vaccinated, but ever after till he died, when nearly eight years old, he was an indescribable sufferer. His body was literally rotten; he had wounds and issues in various places. The smell from the poor boy was almost unbearable, the teeth rotted out of his mouth: his under jaw rotted away entirely. The mother said:

> "When he died I knelt down and thanked God for having called him away. My husband, myself and five other children are all remarkably healthy. The girl from whom my son was vaccinated has never been well since she was vaccinated, though said to have been well then. She is now seventeen years old and has fits. A girl was vaccinated from my son; she is now about eighteen years of age and has never been in good health since." (Ib.Q.2503)

Mary Jane, second child of Samuel Horrox, Joiner, Middleton, was quite healthy till vaccinated when nine months old. A fortnight afterwards she was afflicted with an offensive eruption nearly all over her body. She is now three years of age. Since vaccination she has seldom been free from sores and scabs. He considers vaccination as

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~~(63)~~ ~~###~~ (65) This fact and its accompaniment of sore eyes in the vaccinee, are in accord with and explained by the discoveries of Béchamp before alluded to and by no other theory hitherto suggested.

(66) ~~####~~ Thanks to the false and really prurient notions of MODESTY which prevail among us, and which have been incorporated into law through the sinister interested exertions of "Societies for the suppression of Vice" and the great encouragement of spies, 'agents provocateurs', informers and black-mailers, it has to be confessed that, persons generally truthful, often do LIE, even to their medical attendant, when they have had the misfortune to contract venereal disease. Nevertheless the great probability is that the vaccinifer in this case, as in innumerable others, was itself the victim of invaccinated Syphilis.

~~337~~ ~~248~~ 142 ~~207~~ ~~206~~ ~~323~~ ~~400~~

the sole cause of her bad health. His oldest child, six years of age, has not been vaccinated and a healthier boy could not be found. He and his wife and the families of both of them are remarkably healthy.

Thomas Brooks, silk finisher of Middleton had a daughter, Em perfectly healthy till vaccinated; but from that time till now (March 1871) nearly four years, she has never been well and the parents consider that it was vaccination which caused her bad health. That opinion was shared by the parents of the vaccinifer. Two of their children suffered from vaccination, one is dead, the other though living is in a feeble state. The parents are healthy as are also the rest of their children. Mr. Brooks' child suffered severely from diarrhoea for nine months after vaccination. (67) When this ceased, foul sores broke out on different parts of the body. (68) She suffered greatly and was a source of great suffering to her parents. She was still suffering and in all probability would continue to suffer indefinitely. Mr. Hume-Rothery has seen the child and the marks of the sores. He said "There is literally a large hole in the child's hand, and the child's foot is so disfigured, that in all likelihood the poor little thing will be a cripple for life."

John Boardman, an engraver, had a sister who was vaccinated in infancy. The whole family is a healthy one except this sister, who also was perfectly healthy till vaccinated. No trace of cancer has eve-r appeared in the family history except in the case of this unfortunate child. She was vaccinated; and when she was eighteen months old a can-cer appeared under the chin. At a little over two years of age she was operated on. The doctor inquired into the family history and find

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(67) As to Diarrhoea being a sequel of Vaccination, see Sup. p. ~~148~~ 237 d

(68) ## The probable interpretation of this is that the ~~The~~ physician failed to recognize in the Diarrhoea Nature's effort to eliminate the poison from the blood in this instance, and so ignorant-ly suppressed it. The child being of good vitality, Nature now tried to get rid of it through the skin and opened 'sores' for that purpose. If any one living at Middleton, should read this, I invite them to search out the family of this unhappy young woman: he will, ~~I doubt not~~, fin-d on getting her clinical history that her physician, ~~(unless she had the good fortune to fall under the care of a true Homoeopath)~~ now suppressed the sores, thinking thereby to cure them, and so threw the disease upon the mucus surfaces with D E A T H as the result.

-ing it entirely free from cancer inquired into that of the vaccinifer, when it was found that its mother had a cancer on the thigh of which she subsequently died. It reappeared in Miss Boardman in the left breast when she was thirteen years of age, which was excised in consequence. (Ib. Q.2490) Of course this victim was not cured by excision of the cancer and this life also is sacrificed to the vaccine Moloch. Cancer is a disease of advanced age. There is no record of its appearance in infancy, except, as in this case, inoculated.

272 Mr. Wiggins of Bradshaw Street, Northampton, had a daughter vaccinated when twelve months old; perfectly healthy till vaccinated. Five days after Syphilistic symptoms appeared: Ib.2100 No trace of Syphilis in the family.

John and Ann Farebrother Bottom, of Barrow Fields had a son, their second child, perfectly healthh till vaccinated at four months old. Three months later the vaccinated arm began to break out; the eruption spread upwards until his head and face were one mass of sores. It con-tinued in that state upwards of twelve months. Its parents often had to walk about with it night and day. From suckling, the mother's breast and arm were several times infected. She could rarely move it from arm to arm. Its genitals have all along been swollen and inflamed. When its teeth came, they rotted and many of them broke away. The child was still living at the age of two years and nine months, a miserable object. (Ib. Q.2507, 2510.)

Up to the time of the sitting of this Committee, and indeed for some considerable time after, the pro-vaccinists insisted that vaccination could not be a channel of conveying disease, even though the vaccinifer were afflicted with constitutional disease such as Syphilis. Dr. Henry Alleyne Nicholson, Lecturer on Natural History in Edinborough, in a work entitled "A popular essay on Vaccination", London, Churchill and Sons; expressed the opinion in very strong terms, grounded, he said, both on theoretical reasoning and direct experiment and supported his opinion by those of several eminent medical men to that effect, but he says: "IF SUCH A CASE CAN BE MADE OUT AGAINST VACCINATION, BY ALL MEANS LET THE LAW BE REPEALED. (Ib.Q.2526.)

273 It was not until Dr Cory had passed from his own person

In the "Handbook of Practical medicine" by Dr Hermann Eichhorst New York, Wm Wood & Co 1886 vol IV "On diseases of the blood, nutrition and infectious diseases," p it is said

"Vaccinal syphilis is deserving of special mention. The opponents of compulsory vaccination speak of the danger of infecting children with the lymph taken from a syphilitic child. The pure contents of such a vesicle however, do not infect. They do not acquire infectious properties until enough blood is mingled to be visible to the naked eye.... Microscopic examination of the contents of vaccine vesicles always shows single blood corpuscles, but that does no harm as long as blood cannot be detected by the naked eye.

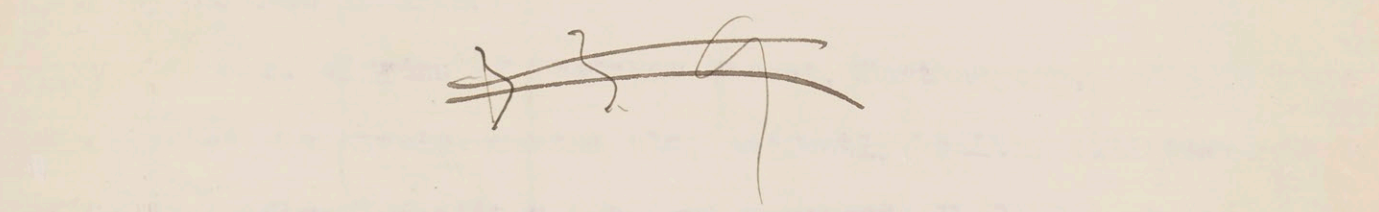
~~339~~ 144 250a ~~407~~ ~~327~~

It was not until Dr:Cory had proved upon his own person that syphilis could be transferred through vaccination from the healthy-looking pustule of a syphilitic vaccinifer, though no blood were apparent in the virus, that the fact was reluctantly confessed; but not only without any expression of contrition for their past errors, productive of so much human suffering, in the past, or thanks or acknowledgement of any kind to the learned and scientific physicians who had before demonstrated the fact, but with signs of anger against them for having been in the right and with a continuance of the insolent abuse which the "leaders of the profession" had lavished upon those by whom the malignant character of the cowpox disease had been demonstrated.

But the case of Dr:Cory has an extreme interest from a scientific point of view. Before he succeeded in inoculating himself with syphilis from the pustule of a child of syphilitic parentage, he had made several experiments upon himself with virus drawn from other cases of congenital syphilis;--taking always, as was thought, care to avoid any admixture of blood with the 'lymph'; and it was only in the third attempt that he succeeded in imparting to himself the really "dread disease" whereof he ultimately died.

Dr: Cory was a skilled and painstaking vaccinator; but what a lamentable ignorance of biology and of pathology was exhibited by him in the very theory which led him to make so fool-hardy an experiment? And what an illustration does it not afford of the general ignorance of medical placemen, when one of their most illustrious examples can be so ignorant, and his ignorance be mistaken for devotion to science! When I played with my own health and life in having myself vaccinated in the winter of 1904 in order that I might learn something of the pathology of vaccination, I exhibited an almost equal ignorance and fool-hardiness, as do all members of the profession who vaccinate either themselves or their children. ~~I do~~

Dr Osler on p 72 of his practice of Medicine gives an ~~clinical~~ account of Dr Cory's case so far as it had developed up to the date of the publication of his work; he states that Dr Cory vaccinated himself four times from ~~four syphilitic~~ syphilitic children. The first time, vaccination followed but no syphilis. Two other attempts were made with negative results, the fourth time he was vaccinated from a child the subject of congenital syphilis. "The lymph" was taken from the child's arm with care avoiding any contamination with blood. At two of the points of insertion, red papules appeared on the 21st day. On the 38th day an ulcer was found which Dr Hutchinson decided was syphilitic. The diseased parts were removed. By the 50th day the constitutional symptoms were well-marked. Since the publication of Dr Osler's work Dr Cory has died, a victim to this fool-hardy experiment - but no account of his last illness and death has been suffered to appear



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When I visited the Lambs Conduits St Station of the British Local government Board in October, 1899, I saw thirteen cases of persons, mostly infants, who had been vaccinated the previous week with "pure glycinerated calf-lymph", of the L.G.B. manufacture, brought back for inspection as required by the English law, a precaution which slight as it is, is not adopted anywhere in the United States, where the only aim of the officials is to make a sufficient showing to secure the pay. One of the thirteen presented a very angry-looking arm, and the body of another was covered, thus the proportion of such cases was two out of thirteen of those I saw. abdomen, chest, buttocks, and thighs with an erythematous eruption; Dr: Cory informed me that in both cases, the health of the parents seemed to have been perfect; naturally he had only seen the mother, his knowledge as to that of the father was from questions put to the mother and her replies. He also informed me that the provision of the law, that no child should be vaccinated unless it appeared to be in perfect health was, he believed, in nearly all cases strictly adhered to in England, and as he believed in Germany also and in all European countries in which vaccination was enforced by law. Will any Health(?) officer in the United States dare to assert that any such consideration for the patient's life or health is shown by vaccinating officials in this country?

Erythema is now conceded to be a not infrequent vaccinide; as it has long been recognized as a frequent syphilide. 69

(46)

On the occasion mentioned in the text, Dr Cory informed me that he disapproved of the use of the shield over the vaccine wound, but that he was obliged to employ it as the Local Govt: Board so ordered. That he found its use increased the inflammation and consequently the cases of severe erysipelas and sore arme. He also informed me that he onjected to the mixing of glycerine with the virus for the reasons, (1) That the lymph is weakened by its use and consequently (2) That it more often fails; (3) That there are at least as many sore arms from its use as there were before; (4) That the inflammation continues beyond the eighth day; (5) That he had seen two deaths from its use and one case of severe erysipelas; (6) That it does not protect against suppuration as claimed for it or from inflammation, and (7) That it is not destructive of organisms, and does no good and much harm. I asked him if I might publish these statements upon his authority; --After a few moments consideration he replied: "Yes, provided you do not do so in this country." I took these notes in his presence and read them over to him, and he said: "That is all Right." Commenting upon the "strict aseptic precautions" he said "What nonsense! it is the only septic operation we do perform."

Since the publication of the ~~above-mentioned~~ essay by Dr:Nicholson above quoted, (supra p 324) the fact of the transmission of syphilis to the vaccinee by vaccination has been proved beyond peradventure, not only by the slaughter of innumerable unconsenting victims, of whom 1863 are enumerated by Dr:Bulkley in his work "Syphilis of the Innocent"(70) but as well by the self-immolation of Dr:Cory; but instead of asking for the repeal of the law, the organized physicians of the United States, and particularly those who, in mockery it might be, are denominated officers of Boards of Health, are constantly striving for more stringent laws to enforce vaccination; and have succeeded in having it enforced with the might of military tyranny upon the hapless victims of American greed in our "Insular possessions". It is erroneously ~~untruthfully, but in most cases ignorantly~~ asserted that by the use of "glycinerated-calf-lymph" all danger of invaccinating any disease except the harmless(?) vaccinia is surely averted. This statement has no evidence to support it and never had any, it is just the same sort of bald and bold assertion that has been employed from Jenner down to the last asserter in American Health Boards. It has been proved untrue by numerous instances already cited in these pages and further evidence of its error will be forthcoming. And here I may as well anticipate the criticism of almost any intelligent student of this work some fifty years from now. It will to such an one, seem a great defect, that illustrations of the ~~diseases~~ pathology of vaccination should be so multiplied in this work. To the scientific apprehension, one or two, or at most three illustrations of each sort of lesion following the operation should amply establish such lesions as belonging to the pathology of vaccination, where no other known cause can be shown to have been present. It will be hardly possible for ~~such~~ the future student to realize the enormous force of the superstition to be overcome, and which has rendered advisable the multiplying of illustrations to effect the ~~work for which this book has been written~~ purpose of instructing the profession upon the subject, as well as the people, which has inspired this work. That this view of the need for such multiplication of lesions is correct is evident from the facth that any such work as this should be at all needed after such works as Dr:Creighton's "Cowpox and Vaccinal-Syphilis" and Dr:Crookshank's "History and Pathology of Vaccination" had been given to the world, as well as the fact that for years I have been seeking in vain to find a publisher for this work; but up till now (Sept 1907) without success. No medical publisher in the U.S. heretofore addressed dares to ally himself with a work so calculated to antagonize his patrons.

(70) By Dr:L.Duncan Bulkley; physician to the New York Cancer Hospital, etc: Prize essay 1891 of the Coll:of Phys:of Phil: Bailey & Fairchild, New York, publishers; 1894.

(1.) ~~342~~ 167 ~~285~~ 325

The following thirteen cases of Alopecia were reported to the Minister of War ~~in the reports (or reports) of the Staff (?) Surgeon, of the ..... Regiment of ..... for the year 1902.~~ The details were communicated to Dr. Boucher, for communication to me, in a letter from Staff Surgeon W. P. ~~Mauvais~~ dated Vincennes, 21st. June, 1904.

All the cases occurred in May and June, 1902.

S. Case I.) Never had Syphilis, was successfully vaccinated on his entry into the army the 19th. of November, 1900. This man is of a robust constitution, served his term regularly and was entered but once in the Infirmary of the Hospital, viz:- from the 20th. of August to 13th. Of September for Colic and Diarrhoea.

S. Case II. Never had Syphilis. Was vaccinated without success three times, the 16th. November, 1899, the 5th. January 1900 and the 24th. of February 1902. Was of a robust constitution and was never on sick report until his attack of Alopecia.

L. Case III. Never had Syphilis. Was vaccinated the 23rd. of November, 1901. Was always in good health until the appearance of his Alopecia.

P. Case IV. Never had Syphilis. Vaccinated successfully the 23rd of November, 1901. Served regularly although not of a robust constitution. He was in the Infirmary in January 1902 for Laryngitis; no other trouble during his service until his attack of Alopecia.

B. (?) Case V. Good constitution. Made but one short sojourn at the Infirmary in December, 1901, for Laryngitis.

V. Case VI. Never had Syphilis. Vaccinated unsuccessfully the 16th. of November, 1899. Was re-vaccinated successfully 5th. of January, 1900. Of a robust constitution. Was treated at the Infirmary in August 1900 for mumps and in November, 1901 for an abscess in the foot.

G. Case VII. Never had Syphilis. Vaccinated without success the 16th. November, 1899, and re-vaccinated successfully the 24th. of February, 1902. Of a good constitution, served his term regularly was at the Infirmary from the 10th. to 28th. of May, 1902, for an abrasion of the foot. No other entry on the sick report.

A. Case VIII. Never had Syphilis. Vaccinated successfully the 19th. of November, 1900, was of a very robust constitution. Was only once at the infirmary, from the 2nd. to the 10th. of January, 1902 for Diarrhoea.

P. Case IX. Never had Syphilis. Vaccinated successfully the 23rd. of November 1901. Of a good constitution. Never entered on sick report.

E. Case X. Never had Syphilis. Vaccinated successfully the 23rd. of November, 1901. Of good constitution. Never at Infirmary.

B. Case XI. Never had Syphilis. Vaccinated unsuccessfully the 16th. Of November, 1899; the 5th. of January, 1900 and the 24th. of February, 1902. Of a robust constitution. Was treated at the Infirmary from the 15th. of January to the 12th. of February, 1900 for phlegmon of the foot; and another time from the 17th. April to 5th. of May, 1902 for Lumbago.

263/126 On the occasion of my visiting St. Paul, Minnesota ~~to lecture~~, in the month of February, 1903, various cases of injury from vaccination were brought to my notice, some of which have formed the subjects of special study in these pages; the following also seem to me worthy of notice.

Mrs. Ida Holm, visited by me at the request of Mrs. Little. Was vaccinated by order of her employer, or at least the threat of losing her employment as a dress-maker if she refused; all the women and girls in the same employment were also vaccinated. This was done in consequence of a small-pox ~~scare~~ groundless scare of raised by Dr. Chage, the Health Officer. Her arm swelled to an enormous size and was very sore. She had high fever and has never been able to do much work since. She was vaccinated in March, 1900, or three years ago, less one month. A few weeks after vaccination her ears became swollen and sore and ulcerated. Purple spots appeared on her face under the skin, and red spots on her chest and body which itched badly. Water blisters appeared on both hands. Dry cough appeared. It was two weeks before the vaccine began to "work"; then chills and fever came on. In the hottest weather she would be as cold as though it were mid-winter. She went into the country during the summer and stayed six weeks or so and improved greatly, and she felt better for awhile. About the first of November she began to have severe pain in the left hip-joint, and was confined to her bed and then to a chair for some days. There was a consultatin of doctors, but they made mistakes in diagnosis; meanwhile she suffered terribly. In the spring of 1901, Dr. Neotrax was consulted and pronounced it hip-disease. She went to bed and weights were applied to the foot to stretch the leg, but for six weeks the patient had to abandon the treatment on account of the torture it occasioned, during all which time she could not lie down, but sat in a chair day and night. After six weeks ~~the stretch was resumed.~~ extension again applied She gradually improved, but is not yet well, her hip being frequently very painful, and for a month or two. In the fall of 1902 she was unable to do any work.

B. Case XII. Never had Syphilis. Successfully vaccinated the 16th. November, 1899. Of Good Constitution. Was only once at the Infirmary from 27th. to the 31st. of July, 1901, for Diarrhoea.

C. Case XIII. Never had Syphilis. Vaccinated successfully the 23rd. of November, 1900. Was not of a robust constitution, but served his term well in the bureaus without interruption.

None of the abpve thirteen cases were ever sufficiently sick to enter the Hospital.

Dr. Mauriac also mentions two cases of Alopecia from Syphilis. They serve to illustrate the resemblance between the syphulides and the vaccinides.

In August 1901, Waltie Dyer of 1131 First Avenue, Minneapolis was vaccinated, twice it did not succeed, then the operation was performed by Dr. Monahan of that City and it began to "work" at once; it left a largish scar. She was eight years old at the time and was vaccinated so that she might attend school. She had been a thoroughly healthy child up to the time of her being vaccinated, she then began to pine, she became thin and pale, her eyes became bloodshot and then a blur came over first one eye and then over both. She had learned to read before this occurred. It kept getting worse and worse and by Christmas she could scarcely distinguish black from white. She became totally blind and so continued for several weeks. She became very nervous and her condition approached chorea; she remained under the treatment of Dr. Sproat, Occulist for a whole year; she is still (Sept. 1903) suffering from excessive nervousness and is a sickly child.

Plate ~~XXVIII~~ I., Figs: I & II. are portraits of Edward William Winship, of 413 Seventh Avenue South, Minn. He was vaccinated on the 25th. of August 1899, by Dr. W. J. Moore. In a few weeks an eczema appeared on the site of the vaccination and soon after upon other portions of the body. The itching was intolerable. At the time the portraits were made the eruption was limited to the arms, scalp and legs

7b Second Co: 151

Dr. George Henry Fox, Clinical Professor of Diseases of the skin at the College of Physicians and Surgeons of New York, supplied to the New York Medical News of January the fourth, /96, a very interesting paper on a case of "Papular Erythema following Vaccination". In it he says :

> "In the simple operation of vaccination it is possible to convey syphilis, leprosy, septicaemia and perhaps tuberculosis, if due precaution is omitted."

"If due precautions be omitted! It is absolutely <u>impossible</u> to guard against such 'accidents' in proof whereof it is enough to state that no advocate of vaccination has ever yet expressed his willingness to <u>guarantee</u> against them or been able to describe a method of surely averting them. It is absolutely <u>impossible</u> as our readers will recollect to guarantee any virus as "pure" or to distinguish between the so-called "pure virus" and one which is envenomed to the highest toxicity.

Dr. Fox continues :-

> "The systematic reaction after vaccination may induce eruptions of varying types. These may appear before the development of the vesicle, but are most frequently met with when this is at its height. They may be erythematous, urticarial, purpuric, and even vesicular or bullous in character, but present no specific features which would indicate their vaccinal origin. These eruptions may depend upon some abnormal condition of the patient, in which case the vaccination cannot be regarded as the prime cause of the rash, inasmuch as it merely evokes an eruption which was already latent and which might have appeared spontaneously or from any one of a variety of causes. (71) Frequently, however, the vaccinated subject is in normal health, and the vaccinal eruption, like a drug rash, can only be attributed to idiosyncrasy. # 72
>
> A not uncommon form of erythemato-papular eruption is illustrated in the following case and by the accompanying chromo-lithograph. (A copy (reduced in size) is given in the Atlas Plate XXV Fig. I.)
>
> In November last I was asked to see a two year old child under the care of Dr. Pierson, of Morristown, N.J. The arm presented a well-developed vaccine pustule, drying into a blackish crust, (ninth day) Around this were considerable redness and swelling, although there was no indication that the vaccine lesion had been injured or irritated in any way. The face was somewhat swollen, and spotted with a few irregular erythematous patches. The trunk was nearly covered with a bright red erythemato-papular eruption, which occasioned the infant considerable distress. The lesions consisted of pin-head-sized, follicular papules, mostly aggregated in small, rounded patches and confluent upon the middle of the back where the skin appeared red and smooth. The papules were numerous upon the palms, and there were a few upon the soles. Upon the extremities (except near the vaccine pustule) the eruption was by no means as copious as upon the trunk.

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(71) But why arouse the 'latent' tendency and that too by <u>septic</u> inoculation?

(72) No! To poisoning; ignorant but ~~none the less~~ still culpable!

Insert I post II p162

The foregoing extract valuable for the correct statement of facts which Dr Fox had observed, is also valuable as illustrating the illogical condition of the medical mind as which is its most authoritative representatives. The student will remember the remarkable assertion of the Dean of the medical school of the University of Tulane in January 1906 which received unanimous applause of the medical section of the American Ass: for the advancement of Science that there was a Scientific logic apart from Vulgar logic, and here we may say we have from Dr Fox, another of the most eminent members of the medical profession of this nice, a statement which seeks to exonerate vaccination from being the Cause of vaccinal eruptions! It only started a latent eruption says Dr Fox, or it is due to the patients idiosyncracy. But why not let the latent eruption stay latent? Why evoke the peccant idiosyncracy. A dipsomaniac has succeeded in conquering his habit for a time, What would Dr Fox say of the physician who should give such dipsomaniac whiskey? But the vaccine poison has evoked the diseased condition and therefore was caused its manifestation. Is it possible that Dr Fox could think that when the eruption faded and the vaccine crust dried up, as he says it did, that the patients constitution had not been seriously affected, is? Dr Fox was too sound a pathologist not to know the contrary.

(now bring in insert II)

The eruption had appeared early in the morning of the preceding day, (a week after vaccination) upon the vaccinated arm. In the eveiming it had developed upon the trunk. After a very restless night the eruption had become quite general, as already descri-bed. At this stage the photograph was taken. During this second day of the eruption the patches upon the trunk became smoother and less angry in hue, although they had increased somewhat upon the arms and legs. The skin was still hot and itchy, gentle rubbing of the back proving very grateful to the little sufferer. The temperature marked 103-1/2°. The treatment consisted in a laxa-[illegible] application of a lotion containing ex-

Plate ~~XXII~~, Fig. 2 is a copy of Willan's picture of "Roseola of Vaccinia, an efflorescence which commonly appears in a congeries of dots and small patches, as here represented, but is sometimes diffuse like the variolous rash; it usually occurs at the same time with the areola, and around the inoculated part". (Willan skin diseases.)

It would be difficult to find a stronger illustration of the power of preconceived bias than this remarkable bringing in of "The variolous rash" when the only thing the rash suggests is the roseola of syphilis, to which it bears an ideal resemblance.

such as scrofula, syphilis etc. NO product of such organism is ~~absolutely~~ sure of be exempt from the infection."

~~The discoveries of Dr. Bechamp not only show this to be true, but also that it is more probable that any one particular produce will be so infected than that it will be free from it.~~

In the "System of Surgery" by Dr. Holmes (p.45, art."Inflammation" by the same Dr. Simon), he says:

> "Morbid poisons are inactive if not in the presence of certain bodily conditions, easy to determine. The contagion of small-pox or of scarletina can no more affect a body not predisposed to receive it, than yeast ~~can~~ ~~procoke~~ has the power to produce alcoholic fermentation or turn pure water into beer. For the production of disease there must be a specific internal condition as well as the external one. "

This is true, and ought to dispose of the nonsensical dogmas and bald assertions with regard to infection, with which the official doctors, and no where more extravagantly than in the United States, are wont to alarm us.

Sir James Paget said before the clinical Society of London:

> "In seeking the origin of congenital syphilis, we should not be satisfied with going to the immediate parents, because I believe it is possible for syphilis to be transmitted from grandparents to grandchildren without the intermediate generation being affected."

---

(3) Yes! But the child's system is pervaded with the vaccinal miasm, and its vitality is permanently impaired.

The eruption had appeared early in the morning of the preceding day, (a week after vaccination) upon the vaccinated arm. In the evening it had developed upon the trunk. After a very restless night the eruption had become quite general, as already described. At this stage the photograph was taken. During this second day of the eruption the patches upon the trunk became smoother and less angry in hue, although they had increased somewhat upon the arms and legs. The skin was still hot and itchy, gentle rubbing of the back proving very grateful to the little sufferer. The temperature marked 103-1/2°. The treatment consisted in a laxative dose of calomel and the application of a lotion containing oxide of zinc in lime water.

On the following morning the eruption was much smoother and paler. Some of the small discoid patches on the trunk presented a bright peripheral ring, with a dull-red or livid centre. Nearly the whole surface of the child's body was involved by the eruption, and the small areas of normal skin presented a strong contrast with the affected portions. The eruption faded rapidly, and the drying of the vaccine crust proceeded as though no rash had occurred. ~~##~~ (73)

Mr. (afterwards, Sir John) Simon, in a paper published in the Journal of Anatomy and Physiology, (London, Oct. 1870,) said :-

"When once an organism has been infected by a constitutional malady, such as scrofula, syphilis etc. NO Product of such organism can be sure to be exempt from the infection."

This is entirely consistent with the researches of the micro-zymas, a consideration whereof show that it is more probable that any particular product will be so infected than that it will be free from such infection.

~~The discoveries of Dr. Bechamp not only show this to be true, but also that it is more probable that any one particular product will be so infected than that it will be free from it.~~

In the "System of Surgery" by Dr. Holmes (p.45, art."Inflammation" by the same Dr. Simon), he says:

"Morbid poisons are inactive if not in the presence of certain bodily conditions, easy to determine. The contagion of small-pox or of scarletina can no more affect a body not predisposed to receive it, than yeast has the power to produce alcoholic fermentation or turn pure water into beer. For the production of disease there must be a specific internal condition as well as the external one."

This is true, and ought to dispose of the nonsensical dogmas and bald assertions with regard to infection, with which the official doctors, and no where more extravagantly than in the United States, are wont to alarm us.

Sir James Paget said before the clinical Society of London:

"In seeking the origin of congenital syphilis, we should not be satisfied with going to the immediate parents, because I believe it is possible for syphilis to be transmitted from grandparents to grandchildren without the intermediate generation being affected."

---

(73) Yes! But the child's system is pervaded with the vaccinal miasm, and its vitality is permanently impaired.

For the word 'affected' substitute the words 'showing any signs of infection', and I believe that statement also to be true, and Béchamp's discoveries ~~explain~~ are in harmony with the double set of phenomena. But with this recognition of the dangers of all inoculations of organic life implied by the above statements, how could Sir John Simon or Sir James Paget expect to avoid the inoculation of diseased conditions? They have nowhere told us how this could be done, nor has any other 'authority', neither is it in the power of living man to do so.

Sir James Paget also said that vaccination produces a permanent morbid (that is diseased) condition of the blood.

The Appendix to the Report of the German Vaccine Commission of 1884, contains a copy of the "Denkschrift" which the Government placed before that Commission: in it, it is stated :-

"At the time when the German Re-Vaccination Law of 1874 was in contemplation, the opinions obtained from the authorities, from the medical experts, declared that no well founded facts were before the profession which betokened an unfavorable influence of vaccination upon health or life. Unfortunately this proposition can no longer be justified. Recent experience has proved, beyond the possibility of doubt, that very serious consequences have occurred from the practice, and the number of discovered cases of Transmitted dieases is by no means small. Syphilis and Erysipelas are known to be thus transmissible and the possibility of transmitting tuberculosis and scrofula, by the vaccine operation, can no longer be contested.

So that Syphilis, Tuberculosis, Leprosy, Scrofula and Erysipelas, which may infect the vaccinifer, be it human or any other animal, may thus, according to Sir John Simon, Sir James Paget, the German Government and other authorities, be transmitted to untold generations of vaccinees. a truth illustrated by the evil effects of vaccination upon the race, testified to by Verdi-DeLisle, by Ancelon, by Bouchier, by Boëns, confirmed by observations of the highest authority and evidenced by the successive censuses made amongst several of the vaccinating nations, ~~including~~ the United States from 1850 down to 1890.

~~Dr. Bulkley in his work "Syphilis of the Innocent"~~ gives an account of 1863 cases and of twenty nine epidemics of confessed invaccinated Syphilis; of which cases, eight hundred and eighty-seven occurred in the United States. When one considers the persistent errors of statement on the part of vaccination officials, alike in this country as in Europe, and their confessed desire "to preserve vaccination from

To come in as Insett 1, p. 254 154 ~~342~~ ~~343~~

~~347~~

To the present generation of physicians it may seem superfluous to insist with so much persistence upon the occurrence of vaccinal-syphilis, as the fact is now universally admitted; though its gravity is constantly sought to be belittled by every imaginable subterfuge. Yet its presentation to the student of today is essential to enable him therefrom to judge what degree of credit may be given to ~~the~~ present allegations of the vaccinists, ~~in this respect.~~

Up to the year 1857, the possibility of such contamination was persistently denied, and every species of abuse was poured out upon the honorable and scientific physicians who had dared to observe and describe occurrences so fatal to the pretensions of the advocates of vaccination. But in November 1856, Dr: Marc one vaccinated a number of children in Lupara in Molise, (Naples.) The vaccine "lymph" had been sent in glass tubes, (up to that time the preferred way of preserving it), and, it is said, "it was observed that it was mixed with a little blood"; but at that time it was none the less fit for the purpose of vaccination on that account.

Twenty-three children were vaccinated from it, - and were syphilized, and from them, nurses and mothers were syphilized, and from them husbands and other children were infected, all in great number.

Thereupon it was alleged it was the blood that did it, and the lymph was then for the first time said to be "impure" because it was said it was mixed with blood; and thereupon a new dogma was started, that for the vaccine material to be pure it must not be mixed with blood and the ~~XXXXXXX~~ practice of the British Government continues today to be founded thereupon; and a new office was created for the proteges of government, and at the time that the Royal (Br:) Comm: of 1889 was sitting, Mr: Farn held the office of "Examiner of Vaccine lymph" and he testified that he examined the vaccine with a microscope, and that if he found any traces of blood in it, the specimen under

348 ~~Insett 3,p.254~~ 155 ~~4354~~

examination was rejected.

Now the assertion that vaccine material was "pure", and the conclusion implied by the practice that it was harmless in such case was another of the bald assertions made by vaccinal authorities for which there was positively no ground, a knowledge of pathology ought to have taught them ~~could~~ that it could not be true, but it has cost ~~[illegible]~~ unspeakable suffering to millions to establish the fact that it was nature. ~~and which events have proved to have been erroneous.~~

I have already quoted

~~In the "Medical Examiner" for May 24th: 1877, Dr: Brudenell Carter says:~~ upon ~~"I think that~~ Syphilitic contamination by vaccine ~~lymph is by no means an unusual occurrence, and that it is~~ very generally overlooked because people do not know when or where to look for it. I think that a large proportion of cases of apparently inherited syphilis are in reality vaccinal, and that the syphilis in these cases does not show itself until the age of from eight to ten years, by which time the relation beyween cause and effect is apt to be lost ...t of."

...o express my adherence to this view ~~in as strong terms~~ ...e from my own experience and practice, and to carry it ...iz: that not only in the cases of children and of prim... ...nation, but also in those of adults and of re-vaccinatin... ...nides, resembling the syphilides, may show themselves for the first time that is so as to be recognized, at ...from ten weeks to twenty or more years from the date of the op... ...nd though some sort of sickness may have existed, its ...acter may then be for the first time recognized; and its ... ~~be even~~ then be not suspected by ~~the ordinary~~ most physicians.

...urnier in his "Leçons sur la Syphilis vaccinale" told ...ating class at the Medical school of Paris that vaccin... ...is is not to be mentioned in public nor, "any where ... but in this amphitheatre", because it might do dis... ...o vaccination; and on p.6 he says:

...ccinal syphilis quite authenticated? Is it absolutly ...nstrated in spite of the denials which have been op... ...d to it? Is it, in a word, definitely established that ...und subject may receive syphilis by the intermediary of ...ccine lymph taken from a syphilitic source? Yes! A ...red times yes; and it is with the demonstration of that ... which must occupy us to begin with."

...p.6-12 the lecturer treats of the case of M.Millard's ~~XXXXXXXXXXXXXXXXXXXXXXXX~~ ...yphilized by vaccine lymph furnished by the Academy of

(74)

74 See the testimony of Mr: William Tebb, before the Late Royal Br: Comm: Q.10,203 and further. It is to laymen, and not to physicians that we are indebted for the first discovery, and to the demonstration that syphilis may be invaccinated by the use of calf-lymph, and the names of William Tebb and William White are to be honored on that as on many other accounts in connection with this strange superstition; they did not give the scientific demonstration, for that we are indebted to Drs: Boens, Creighton and Crookshank.

examination was rejected.

Now the assertion that vaccine material was "pure", and the conclusion implied by the practice that it was harmless in such case was another of the bald assertions made by vaccinal authorities for which there was positively no ground, a knowledge of pathology ought to have taught them that it could not be true, but it has cost unspeakable suffering to millions to establish the fact that it was nature. ~~and which events have proved to have been erroneous.~~

I have already quoted ~~In the "Medical Examiner" for May 24th: 1877, Dr: Brudenell Carter says:~~ upon ~~"I think that~~ Syphilitic contamination by vaccine ~~lymph is by no means an unusual occurrence, and that it is~~ very generally overlooked because people do not know when or where to look for it. I think that a large proportion of cases of apparently inherited syphilis are in reality vaccinal, and that the syphilis in these cases does not show itself until the age of from eight to ten years, by which time the relation beyween cause and effect is apt to be lost sight of."

I desire to express my adherence to this view material ~~in as strong terms as possible~~ from my own experience and practice, and to carry it further, viz: that not only in the cases of children and of primary vaccination, but also in those of adults and of re-vaccination the vaccinides, resembling the syphilides, may show themselves for the first time, that is so as to be recognized, at any time from ten weeks to twenty or more years from the date of the operation, and though some sort of sickness may have existed, its real character may then be for the first time recognized, and its aetiology ~~be even~~ then be not suspected by ~~the ordinary~~ most physicians.

M. Fournier in his "Leçons sur la Syphilis vaccinale" told his graduating class at the Medical school of Paris that vaccinal syphilis is not to be mentioned in public nor, "any where else but in this amphitheatre", because it might do disservice to vaccination; and on p.6 he says:

"Is vaccinal syphilis quite authenticated? Is it absolutly demonstrated in spite of the denials which have been opposed to it? Is it, in a word, definitely established that a sound subject may receive syphilis by the intermediary of a vaccine lymph taken from a syphilitic source? Yes! A hundred times yes; and it is with the demonstration of that fact which must occupy us to begin with."

On pp.6-12 the lecturer treats of the case of M. Millard's patient, syphilized by vaccine lymph furnished by the Academy of Medicine.

Prof. Fournier admits that there are many more cases on the cards or in the memories of practitioners than in the columns of our journals; that he himself had knowledge of two actual epidemics of vaccinal-syphilis which have been kept secret and hushed up. In the United States the mere possibility of vaccinal-syphilis was insolently denied up to about 1863, and to the present day, with equal ignorance and arrogance to that displayed by their predecessors, the vaccinal authorities assert that all danger of the inoculation of syphilis is averted by the use of "calf-lymph." It has already been abundantly shown by Drs: Creighton and Crookshank, in their respective works before cited, and I think also in this work, that the true analogue of cowpox is syphilis; and it is to be hoped that the interested denials of the official doctors will not be longer permitted to fool the people.

Dr: Bulkley in his work, "Syphilis of the Innocent" before cited (p.) gives an account of <u>One thousand eight hundred and sixty-three</u> cases, and of twenty-nine epidemics of confessed in-vaccinated syphilis; of which cases, eight hundred and eighty-seven occurred in the United States. I have met with a large number in my own restricted practice, over fifty, - I sent histories of several of them to different medical journals published in this country, - ~~in no case have they been~~ only homoeopathic journals have in any case admitted to their columns! When one considers the persistent errors of statement on the part of vaccination officials, alike in this country as in Europe, and their confessed desire "to preserve vaccination

reproach"[75] as also the great difficulty, owing to the long period which often elapses before syphilis declares itself, of reaching the real facts, these confessed numbers must be many times multiplied to get at any thing like an approximation of the real mischief of vaccination from syphilitic inoculation alone. This conclusion is amply borne out by the great increase of deaths from Syphilis, especially in infants under one year which have occurred in Great Britain; a table of such deaths is to be found in Dr. Creighton's "Cow-pox and Vaccinal Syphilis" p. 145 for London and another for England and Wales. In London the deaths from Syphilis have arisen from 24 in 1843 to 196 in 1858, for infants under one year, and for all other ages, from 45 in 1843 to 70 in 1858, and for England and Wales from 255 in 1847 to 1,733 in 1884 for infants under one year, and only from 310 in 1847 to 547 in 1884 for all other ages. Furthermore the first compulsory vaccination law was passed in 1854, and the greatest leap was made in that year, viz. from 380 in 1853 to 591 in 1854, for infants under one year, while the increase for all ages is fully accounted for in the increase in population. But justice is not done to this gloomy page of medical history by considering the deaths from syphilis under one year only. The period which elapses before infection shows itself is ~~often~~ very prolonged, often many years; and death does not result for a yet longer period. This is well illustrated in the case mentioned in the testimony of Mr. Thomas Wright before the Royal Commission, (Fourth report, Q.14,947 p.233.)

Another difficulty in the way of recognizing syphilis after vaccination, especially when not manifecting itself immediately, is the

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[75] As this expression has often been quoted and may again be referred to in these pages, and some of my readers may not be aware of their application, it will be well to explain it. In the Birmingham Medical Review, Janueary, 1874, Mr. Henry May, stated in a letter to that Journal as follows:-

> "A death from vaccination occurred not long ago in my practice, and although I had not vaccinated the child, yet in my desire to preserve Vaccination from reproach, I omitted all mention of it from my certificate of death."

Every medical man knows that this is the common practice of the profession, nor was any voice raised in censure of Dr. May. And in pursuance of that same unhappy desire to "preserve Vaccination from reproach" the most evident cases of death from vaccination are continually attempted to be explained away in the teeth of the strongest evidence; and the press generally joins with the doctors in their efforts to fool the people upon this subject.

fact that the profession does not as yet look upon the vaccinal ulcer in its true light of a chancre. If they did, there would be no lack of secondary symptoms to observe. Unfortunately the prejudices of education render the medical profession generally blind to such cases when they come under their observation, even in their own practice.

An unfortunate illustration of the efforts of officials to try and hide the truth in cases of vaccinal disaster has recently occurred in Great Britain. The gentlemen who have held the Office of Registrar General in England heretofore, have sought to give the public the truth so far as the materials furnished to them by the medical practitioners would permit. Unfortunately the gentleman who held the Office at the beginning of 1902 has made a change in his classification of causes of death, which cannot but render still more difficult the obtaining information as to vaccinal deaths. For the past twenty years or so, there has been a Heading of "Deaths from Cow-pox and other effects of vaccination." He also had a heading, "Erysipelas after Vaccination." Both of these are now abandoned. The entries in future will be merely "Cow pox" or "Erysipelas". Can there have been any object in this change other than that avowed by Dr.May-"To preserve vaccination from reproach"?

But even since the forgoing was penned a further defect has been established in his methods by the present (1904) incumbent of the office of Registrar-General of England and Wales in that he omits to publish, and refuses to take measures to ascertain the date of vaccination of patients dying of small-pox, even when the certificate of death states that the patient had been vaccinated during the incubation period, and in reply to a letter of inquiry (published in the "Vaccination Inquirer" for May, 1902, Vol. XXIV., pp.30-31) states that the period of incubation in small-pox is not a matter of opinion, "since medical experts declare that the period of incubation, from infection to the appearance of febrile or eruptive symptoms of disease, is twelve times twenty-four hours."

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282 & 29. Dr. Gregory, who had probably more experience of small-pox than any Physician since Sydenham, in his lecture on eruptive fevers, said, p.40 :-

"With respect to the period of incubation, a large accumulation of facts enables me to fix it at twelve days of apyrexia and two of fever, fourteen in all". and further:
"The incubative period admits of some latitude. The extremes may perhaps be stated at ten and sixteen days."

The celebrated Erasmus Wilson in his work upon "Diseases of the Skin", before quoted, says, p.96. :-

"The period of incubation is of variable duration, and comprehends all that space of time which intervenes between the exposure of the body to infection or contagion, and the invasion of the disease. In very severe cases the period of incubation is short; in the milder forms, on the contrary, it is long. The limits commonly assigned to this period are from five or six to twenty days, and cases sometimes occur in which it would seem to be still further prolonged."

The fact that these authorities date back to the years 1843 and 1847 respectively, forms no objection to their value. Small-pox was really better known to them and their contempories than it is to most of the profession and so-called experts of to-day; but in "A text-book of Medicine" by Adolf Strumpell, in its translated edition by Drs. Herman F.Vickery, Philip Coombs Knapp, and Frederick C. Shuttuck we have the latest "experts" and authorities of ~~the old~~ school, and in " Hand-book of the Diseases of Children" by Dr. Charles E. Fisher, we have an "expert" of the Homoeopathic School; the one published in 1889 and the other in 1895; and this is what they have to say respectively upon the subject :-

"The stage of incubation lasts some ten to fourteen days, often a somewhat shorter time, seldom longer." (p.49.)(Dr.Strumpell.) Dr. Fisher, says, (p.256) "Small-pox presents a period of incubation varying from ten to fourteen days, during which time there are not apt to be evidence of oncoming disease."

In Stalwager's work on "Diseases of the skin" (W.B.Saunders & Co., Phil:1903), the article on small-pox is contributed by Dr. Welch, for many years Superintendent of the Municipal Hospital, Phil. He is one of the most extreme vaccinationists, and his authority may not be disputed by the advocates of the rite. At p.450 of the above work,

he says :-

283 & 2 Co "The period of incubation of small-pox is seldom less than eight days or more than fourteen, commonly ten to twelve."

We have also an official authority which the pro-vaccinists may not dispute. Dr. Thomas Dixon Savill was employed by the Local Government Board to investigate the out-break of Small-pox in Warrington in 1892-1893, and his report 76 was published in 1897; on p.2, he says:

"THE PERIOD OF TIME which elapses between infection and the development of symptoms of small-pox is in many ways a point of considerable importance in an investigation of this kind. Since the commencement of this inquiry an authoritative statement on the subject has appeared in the report of a Committee of the Clinical Society of London: (Transactions of the Clinical Society, Supplement to Vol. XXV.) This Committee gives further confirmation of the remarkable constancy of the incubation period of small-pox, and shows that the eruption vary generally appears on the fourteenth day after infection.....Nevertheless, the same authority mentions exceptional cases where this interval has been as short as twelve and as long as twenty-three days.

Notwithstanding the report of the Committee of the Clinical Society of London, which the Local Government Board regards as "authoritative", and which, as seen, contradicts the precise and positive statement of the Registrar-General, the student of these pages has seen abundant reason for suspending judgment upon the question of the "Period of Incubation" of small-pox, and for an entire reconsideration of the theory, upon which the autopsies of Dr. Spinzig and others throw so much doubt. It is a noticeable fact that Sydenham, [Y 66] who had so much experience and wrote so ably and so fully upon small-pox makes no mention of the "Period of Incubation"; and what is perhaps more significant, Dr. John D. Fisher whose work on Small-pox, Varioloid diease, Cow-pox and Chicken-pox", published in 1834, with its admirable illustrations, furnishes, together with the writings of Sydenham, the classical description of the disease to this very day, also omits all mention of the "Period of Incubation" from his work. Is not the only possible conclusion from such omission on the part of two such exact and conscientious writers that they did not consider that there was any certain knowledge about this so-called "Period of Incubation"? And as the above quotations from supposed modern 'authorities' show, there has been no agree-

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ment arrived at between later writers; nor in the absence of more accurate pathological knowledge than is at present possessed by any known writer or physician, can any sound conclusion be arrived at.

Now upon the truth of any theory of period of incubation the great mass of statistics handled by the Registrar-General of Great Britain would have been capable of throwing considerable light, if the dates, or supposed dates had been accurately recorded. The omission so to do, renders this great wealth of material of very little value for the purpose. This is the more to be regretted because even the very imperfect means of investigation and of verification remaining have sufficed to show serious errors in the returns of the Registrar-General. The following is an illustration of this regrettable fact; numerous other instances will appear incidentally in the course of this work. An assertion much favored by the pro-vaccinists today is, that no cases of death occur within ten years of the vaccination or re-vaccination of the patient. This assertion was boldly made by the Registrar-General in his report for 1902 with respect to 1,015 deaths from small-pox in London from August 1901 to April, 1902. But now for one instance of error in this bold assertion. George William Reddall was born at 168 St. Stephen's Road, Bow, on March 13th., 1894. On the 30th. of November he was removed to the Hospital Ships, suffering from small-pox and died there on the second of December, 1901. His death is recorded in the Metropolitan Asylum's Board's report as that of an UN-vaccinated child #1 It was so reported to the Registrar-General, and so appeared in his returns. The vaccination Register, kept by Mr.H.A.Hutchins, the vaccination Officer for the Bow District of the Poplar Union, (London) shows that the above-named George William Reddall was "Successfully vaccinated by Mr.W.Hamlin, and a certificate of "successfull vaccination" was given by him on the 30th. of July, 1894, in respect thereof!

#1 Had the fact that he died within the now asserted ten year period of immunity any connection with his death being thus recorded?
In the same report of Dr.Thos.D.Savill before quoted, 38 vaccinated persons are reported as dying of small-pox as against 24 said to have been un-vaccinated. Of the vaccinated two were between the ages of five and ten years. (Table XVI., p.35.)

To ~~come in after p.354 red and before the next insert.~~

In the same report it was claimed that no vaccinated child under one year of age had been treated in the hospitals, but on referring to the Registrar General's weekly records it appears that three deaths from small-pox of vaccinated infants had occurred in the Boards Hospital. The mode in which this is attempted to be "explained" is that in the Board's reports the words vaccinated and unvaccinated have a different meaning from what they have in the Registrar General's report. By those words the board means "vaccinated or unvaccinated at the time of exposure to and contracting the disease." (Italics are the Boards.)

It has been shown how flexible is this term and how flexible this excuse. The reader is reminded of Cabbett's aphorism.

But on p. 9 of Vol. I. of this report it is said

> "Some authorities held that with the widespread disregard of vaccination and the consequently increasing number of susceptible persons in the huge population of London, a serious epidemic must sooner or later occur should the disease succeed in invading and taking root amongst the people. "

And yet out of this large number of susceptible persons in the huge population of London, among whom this widespread disregard of vaccination had occurred only 372 are alleged to have been attacked with smallpox as against 1282, confessed to have been vaccinated, of whom 127 died: -'modified 'of course!.

The provaccinists do not seem able to realize that the more unvaccinated they make out a given population to be when smallpox attacks it, the more clearly does it appear that vaccination is useless from the larger proportion of vaccinated who are attacked by the disease.

The above numbers are quoted as given by the vaccinators themselves; properly there should be added, the 89 classed as

"doubtful", and a large proportion of those classed as "unvaccinated"; for upon impartial investigation in other instances, many of those asserted to have been unvaccinated, and especially so among the more severe and fatal cases, have been proved to have been vaccinated.

Then too from the unvaccinated should be deducted all under the vaccination age (now 6 months), all whose vaccination had been postponed on account of illness and all who had been vaccinated at any time before the disease declared itself; Most of those so vaccinated had in truth the disease ~~itself~~ invaccinated. The Report of the Asylum's board for 1902 shows 5,663 vaccinated cases with 578 deaths (modified?) The curious thing about these deaths is that 310 or 3/5ths nearly of the whole, had the finest kind of vaccinal scars = half and upward of 1/2 square inch. The classification of "Vac^{d}" "Doubtful" and "Unvac:" is open to the same criticisms as above made with regard to those so classified in 1901.